Form NLRB - 501 (2-08)

# UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

#### INSTRUCTIONS:

File an original of this charge with NLRB Regional	Director in which the alleged unlair labor practice of	ccurred or is occurring.
1.	EMPLOYER AGAINST WHOM CHARGE IS BROU	GHT
a. Name of Employer		b. Tel. No.
West Side Center for Independent Living		(310) 390-3611 ext 201
, ,		c. Cell No.
d. Address (street, city, state ZIP code)	e. Employer Representative	f. Fax No.
12901 Venice Blvd., Los Angeles, CA	Anastasia Bacigalupo, Esq.	(310) 390-4906
90066		g. e-Mail
70000		Anastasia@wcil.org
		h. Dispute Location (City and State)
		Los Angeles, CA
i. Type of Establishment (factory, nursing home,	j. Principal Product or Service	k. Number of workers at dispute location
hotel)	j. Principal Floduct of Service	16
Non-profit disability rights organization	disability rights advocacy	01
	d is engaging unfair labor practices within the meani	ng of eastion 9(a) subscations (1) and (5) of the
	or practices are practices affecting commerce within	
	within the meaning of the Act and the Postal Reorga	
	se statement of the facts constituting the alleged un	
2. Datio of the charge (correction a circumstance)	oo daadaa ah a	an issue products,
Within the past six months, the above	e-named Employer has terminated(b) (	6), (b) (7)(C) a member of the
bargaining unit, without giving the U	nion prior notice or an opportunity to	bargain.
	ation, give full name, including local name and numb	per)
Association of Professional Disable	ed Service Employees	
	• •	
4a. Address (street and number, city, state, and ZI	P code)	4b. Tel. No.
4a. Address (street and number, city, state, and 21	r code)	(858) 361-7533
		4c. Cell No.
1375 Sierra Bonita Suite #1, Los Angeles,	California 90019	1
		(858) 361-7533
		4d. Fax No.
		(323) 746-5512
		4e. e-Mail
		jeffmichaelson@hotmail.com
5. Full name of national or international labor orga	nization of which it is an affiliate or constituent unit (	to be filled in when charge is filed by a labor
organization)		
6. DECLARATION		Tel. No.
	nd that the statements are true to the best of	(858) 361-7533
my knowledge and belief.		(838) 301-7333
//	$\overline{}$	Office, if any, Cell No.
By:	Jeff Michaelson	(858) 361-7533
(signature of representative or person making c	harge) Print Name and Title	Fax No.
		(323) 746-5512
Address: 1375 Sierra Bonita Suite #1, Los	Date: 8/14/15	e-Mail
Angeles, California 90019		jeffmichaelson@hotmail.com

### WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.





REGION 31 Agency Website: www.nlrb.gov 11500 W Olympic Blvd Ste 600 Telephone: (310)235-7351 Los Angeles, CA 90064-1753 Fax: (310)235-7420 Download NLRB Mobile App

August 17, 2015

Jeff Michaelson Association of Professional Disabled Service Employees 1375 S. Sierra Bonita Ave., Suite #1 Los Angeles, CA 90019

Re: West Side Center for Independent Living

Case 31-CA-158113

Dear Mr. Michaelson:

The charge that you filed in this case on August 14, 2015 has been docketed as case number 31-CA-158113. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney CARLOS GONZALEZ whose telephone number is (310)235-7805. If this Board agent is not available, you may contact Deputy Regional Attorney ANNE J. WHITE whose telephone number is (310)235-7638.

**Right to Representation:** You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or at the Regional office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you

fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

**Procedures:** We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website www.nlrb.gov. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website www.nlrb.gov or from the Regional Office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin Regional Director

Mori Rubin





REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

August 17, 2015

Anastasia Bacigalupo West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-158113

Dear Ms. Bacigalupo:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney CARLOS GONZALEZ whose telephone number is (310)235-7805. If this Board agent is not available, you may contact Deputy Regional Attorney ANNE J. WHITE whose telephone number is (310)235-7638.

<u>Right to Representation</u>: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, www.nlrb.gov, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent.

Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor any request to place limitations on our use of position statements or evidence beyond those prescribed by the Freedom of Information Act and the Federal Records Act. Thus, we will not honor any claim of confidentiality except as provided by Exemption 4 of FOIA, 5 U.S.C. Sec. 552(b)(4), and any material you submit may be introduced as evidence at any hearing before an administrative law judge. We are also required by the Federal Records Act to keep copies of documents gathered in our investigation for some years after a case closes. Further, the Freedom of Information Act may require that we disclose such records in closed cases upon request, unless there is an applicable exemption. Examples of those exemptions are those that protect confidential financial information or personal privacy interests.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website, <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a> or from an NLRB office upon your request. NLRB Form 4541 offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin Regional Director

Mori Rubin

#### Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire



REGION 31 11500 W Olympic Blvd Suite 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420

April 17, 2017

Anastasia Bacigalupo, ESQ. West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re:

West Side Center for Independent Living

Case 31-CA-158113

Dear Ms. Bacigalupo:

This is to advise you that I have approved the withdrawal of the charge in the above matter.

Very truly yours,

Mori Rubin

Regional Director

cc: Jeff Michaelson, President
Association of Professional Disabled
Service Employees
1375 S Sierra Bonita Ave
Suite 1
Los Angeles, CA 90019-2505

Form NLRB - 501 (2-08)

# UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

31-CA-158114

Case

8/14/2015

Date Filed

DO NOT WRITE IN THIS SPACE

INSTRUCTIONS:

File an original of this charge with NLRB Regional Director in which the alleged unfair labor practice occurred or is occurring. 1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT a. Name of Employer West Side Center for Independent Living (310) 390-3611 ext 201 c. Cell No. d. Address (street, city, state ZIP code) e. Employer Representative f. Fax No. (310) 390-4906 12901 Venice Blvd., Los Angeles, CA Anastasia Bacigalupo, Esq. 90066 g. e-Mail Anastasia@wcil.org h. Dispute Location (City and State) Los Angeles, CA i. Type of Establishment (factory, nursing home, j. Principal Product or Service k. Number of workers at dispute location hotel) 16 Non-profit disability rights organization disability rights advocacy I. The above-named employer has engaged in and is engaging unfair labor practices within the meaning of section 8(a), subsections (1),(3), and (4) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. 2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) Within the past six months, the above-named Employer has retaliated against employee (b) (6), (b) (7)(C) by making changes relating to salary due to Union activities and because of participation in a Board proceeding. 3. Full name of party filing charge (if labor organization, give full name, including local name and number) Association of Professional Disabled Service Employees 4a. Address (street and number, city, state, and ZIP code) b) (6), (b) (7)(C) (6). (b) (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) 5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization) 6. DECLARATION I declare that I have read the above charge and that the statements are true to the best of Print Name and Title Address (b) (6), (b) (7) (C) Date: 8/14/15

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.





REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

August 18, 2015

(b) (6), (b) (7)(C)

Association of Professional Disabled Service Employees (b) (6), (b) (7)(C)

Re: West Side Center for Independent Living

Case 31-CA-158114

Dear (b) (6), (b) (7)(C)

The charge that you filed in this case on August 14, 2015 has been docketed as case number 31-CA-158114. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310)235-7805. If this Board agent is not available, you may contact Deputy Regional Attorney Anne J. White whose telephone number is (310)235-7638.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or at the Regional office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website www.nlrb.gov. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website www.nlrb.gov or from the Regional Office upon your request. *NLRB Form 4541, Investigative Procedures* offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin

Mori Rubin Regional Director





REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

August 18, 2015

Anastasia Bacigalupo West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-158114

#### Dear Bacigalupo:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310)235-7805. If this Board agent is not available, you may contact Deputy Regional Attorney Anne J. White whose telephone number is (310)235-7638.

<u>Right to Representation</u>: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, www.nlrb.gov, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not enough to be

considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor any request to place limitations on our use of position statements or evidence beyond those prescribed by the Freedom of Information Act and the Federal Records Act. Thus, we will not honor any claim of confidentiality except as provided by Exemption 4 of FOIA, 5 U.S.C. Sec. 552(b)(4), and any material you submit may be introduced as evidence at any hearing before an administrative law judge. We are also required by the Federal Records Act to keep copies of documents gathered in our investigation for some years after a case closes. Further, the Freedom of Information Act may require that we disclose such records in closed cases upon request, unless there is an applicable exemption. Examples of those exemptions are those that protect confidential financial information or personal privacy interests.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website, <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a> or from an NLRB office upon your request. NLRB Form 4541 offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin

Mori Rubin Regional Director

#### Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire

Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420

March 30, 2016

(b) (6), (b) (7)(C)

Association of Professional Disabled Service Employees
(b) (6), (b) (7)(C)

Re: West Side Center for Independent Living

Case 31-CA-158114

Dear (b) (6), (b) (7)(C)

We have carefully investigated and considered your charge that West Side Center for Independent Living (Employer) has violated the National Labor Relations Act.

**Decision to Dismiss:** Based on that investigation, I have decided to dismiss your charge for the reasons discussed below.

Your charge alleges that the Employer violated Section 8(a)(3) and (4) of the Act by retaliating against an employee by making changes relating to salary due to union activities and because of participation in Board proceedings. Pursuant to Section 10(b) of the Act, in order to be timely, an unfair labor practice charge must be filed and served within six months of the occurrence of the alleged unfair labor practice(s). The evidence here establishes that the alleged unfair labor practices occurred on (b)(6),(b)(7)(C) 2015, and that the Charging Party learned of these at that time. The charge, however, was not filed until August 14, 2015, and it was not served until August 18, 2015. Accordingly, because the charge was filed and served more than six months after the alleged unfair labor practices occurred, the allegations in the charge are time-barred by Section 10(b) of the Act.

Your Right to Appeal: You may appeal my decision to the General Counsel of the National Labor Relations Board, through the Office of Appeals. If you appeal, you may use the enclosed Appeal Form, which is also available at <a href="www.nlrb.gov">www.nlrb.gov</a>. However, you are encouraged to also submit a complete statement of the facts and reasons why you believe my decision was incorrect.

Means of Filing: An appeal may be filed electronically, by mail, by delivery service, or hand-delivered. Filing an appeal electronically is preferred but not required. The appeal MAY NOT be filed by fax or email. To file an appeal electronically, go to the Agency's website at <a href="https://www.nlrb.gov">www.nlrb.gov</a>, click on E-File Documents, enter the NLRB Case Number, and follow the detailed instructions. To file an appeal by mail or delivery service, address the appeal to the General Counsel at the National Labor Relations Board, Attn: Office of Appeals, 1015 Half

Street SE, Washington, DC 20570-0001. Unless filed electronically, a copy of the appeal should also be sent to me.

Appeal Due Date: The appeal is due on April 13, 2016. If the appeal is filed electronically, the transmission of the entire document through the Agency's website must be completed no later than 11:59 p.m. Eastern Time on the due date. If filing by mail or by delivery service an appeal will be found to be timely filed if it is postmarked or given to a delivery service no later than April 12, 2016. If an appeal is postmarked or given to a delivery service on the due date, it will be rejected as untimely. If hand delivered, an appeal must be received by the General Counsel in Washington D.C. by 5:00 p.m. Eastern Time on the appeal due date. If an appeal is not submitted in accordance with this paragraph, it will be rejected.

Extension of Time to File Appeal: The General Counsel may allow additional time to file the appeal if the Charging Party provides a good reason for doing so and the request for an extension of time is received on or before April 13, 2016. The request may be filed electronically through the *E-File Documents* link on our website <a href="www.nlrb.gov">www.nlrb.gov</a>, by fax to (202)273-4283, by mail, or by delivery service. The General Counsel will not consider any request for an extension of time to file an appeal received after April 13, 2016, even if it is postmarked or given to the delivery service before the due date. Unless filed electronically, a copy of the extension of time should also be sent to me.

Confidentiality: We will not honor any claim of confidentiality or privilege or any limitations on our use of appeal statements or supporting evidence beyond those prescribed by the Federal Records Act and the Freedom of Information Act (FOIA). Thus, we may disclose an appeal statement to a party upon request during the processing of the appeal. If the appeal is successful, any statement or material submitted with the appeal may be introduced as evidence at a hearing before an administrative law judge. Because the Federal Records Act requires us to keep copies of case handling documents for some years after a case closes, we may be required by the FOIA to disclose those documents absent an applicable exemption such as those that protect confidential sources, commercial/financial information, or personal privacy interests.

Very truly yours,

Mar Tubin

Mori Rubin Regional Director

Enclosure

West Side Center for Independent Living - 3 - Case 31-CA-158114

cc: Anastasia Bacigalupo, ESQ.
West Side Center for Independent Living
12901 Venice Blvd
Los Angeles, CA 90066-3509

### UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

### INSTRUCTIONS:

CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE Case Date Fited 31-CA-161753 10/8/2015

	Director in which the alleged unfair labor practice o	
	EMPLOYER AGAINST WHOM CHARGE IS BROU	
a. Name of Employer West Side Center for Independent Living		b. Tel. No.
west side Center for Independent Living		(310) 390-3611 ext 201 c. Cell No.
d. Address (street, city, state ZIP code)	e. Employer Representative	c. Cell No.
12901 Venice Blvd., Los Angeles, CA	Anastasia Bacigalupo, Esq.	(310) 390-4906
90066	Anastasia Dacigatupo, Esq.	g. e-Mail
90000		Anastasia@wcil.org
		h. Dispute Location (City and State)
		Los Angeles, CA
i. Type of Establishment (factory, nursing home,	i. Principal Product or Service	k. Number of workers at dispute location
hotel)	J. Fillicipal Floddet of Service	16
Non-profit disability rights organization	disability rights advocacy	10
	I is engaging unfair labor practices within the meaning	not of section 8(a) subsections (1) (3) and (4) of
	labor practices are practices affecting commerce w	
	erce within the meaning of the Act and the Postal F	
	se statement of the facts constituting the alleged un	
On about (b) (6), (b) (7)(C) 2015, the ab	ove-named Employer disciplined (b)	(6), (b) (7)(C) due to Union
activities and because of participa		
participa	aton in a board proceeding.	
	ation, give full name, including local name and num	ber)
Association of Professional Disable	ed Service Employees	
	· · · · · · · · · · · · · · · · · · ·	
4a. Address (street and number, city, state, and Zi	. ,	4b. Tel. No.
4a. Address (street and number, city, state, and ZI	. ,	4b. Tel. No. (b) (6), (b) (7)(C)
	. ,	4b. Tel. No. (b) (6), (b) (7)(C) 4c. Cell No.
4a. Address (street and number, city, state, and ZI (b) (6), (b) (7)(C)	. ,	(b) (6), (b) (7)(C) 4c. Cell No.
	. ,	(b) (6), (b) (7)(C)
	. ,	(b) (6), (b) (7)(C) 4c. Cell No. (b) (6), (b) (7)(C) 4d. Fax No.
	. ,	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)
	. ,	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail
(b) (6), (b) (7)(C)	P code)	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)	. ,	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)	P code)	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)  5. Full name of national or international labor organization)	P code)	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  to be filled in when charge is filed by a labor
(b) (6), (b) (7)(C  5. Full name of national or international labor organization)  6. DECLARATION	P code)  nization of which it is an affiliate or constituent unit (	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  to be filled in when charge is filed by a labor  Tel. No.
(b) (6), (b) (7)(C  5. Full name of national or international labor organization)  6. DECLARATION	P code)  nization of which it is an affiliate or constituent unit (	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  to be filled in when charge is filed by a labor
(b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION 1 declare that I have read the above charge of my knowledge and (b) (6), (b) (7)(C)	P code)  nization of which it is an affiliate or constituent unit (	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  to be filled in when charge is filed by a labor  Tel. No. (b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION 1 declare that I have read the above charge of my knowledge and (b) (6), (b) (7)(C)	P code)  nization of which it is an affiliate or constituent unit (	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  to be filled in when charge is filed by a labor  Tel. No. (b) (6), (b) (7)(C)  Office if any Cell No.
(b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION 1 declare that I have read the above charge of my knowledge and (b) (6), (b) (7)(C)	P code)  nization of which it is an affiliate or constituent unit (	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  to be filled in when charge is filed by a labor  Tel. No. (b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION 1 declare that I have read the above charge of my knowledge and (b) (6), (b) (7)(C)	P code)  nization of which it is an affiliate or constituent unit (  that the statements are true to the best of (C)(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  to be filled in when charge is filed by a labor  Tel. No. (b) (6), (b) (7)(C)  Office, if any, Cell No. (b) (6), (b) (7)(C)
5. Full name of national or international labor organization)  6. DECLARATION 1 declare that I have read the above charge my knowledge and (b) (6), (b) (7)(C)  By (b) (6), (b) (7)(C) epiesei (b) (6), (b) (7) (f) person making of	nization of which it is an affiliate or constituent unit (  and that the statements are true to the best of  (C) (b) (6), (b) (7)(C)  That is a statement and little (b) (6)	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  to be filled in when charge is filed by a labor  Tel. No. (b) (6), (b) (7)(C)  Office if any, Cell No. (b) (6), (b) (7)(C)
5. Full name of national or international labor organization)  6. DECLARATION 1 declare that I have read the above charge my knowledge and (b) (6), (b) (7)(C)  By (b) (6), (b) (7)(C) epiesei (b) (6), (b) (7) (f) person making of	nization of which it is an affiliate or constituent unit (  and that the statements are true to the best of  (C) (b) (6), (b) (7)(C)  That is a statement and little (b) (6)	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  to be filled in when charge is filed by a labor  Tel. No. (b) (6), (b) (7)(C)  Office, if any, Cell No. (b) (6), (b) (7)(C)  Fax No. (b) (6), (b) (7)(C)  e-Mail
(b) (6), (b) (7)(C  5. Full name of national or international labor organization)  6. DECLARATION 1 declare that I have read the above charge my knowledge and (b) (6), (b) (7)(C)  By (b) (6), (b) (7)	nization of which it is an affiliate or constituent unit (  and that the statements are true to the best of  (C) (b) (6), (b) (7)(C)  That is a statement and little (b) (6)	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  to be filled in when charge is filed by a labor  Tel. No. (b) (6), (b) (7)(C)  Office, if any, Cell No. (b) (6), (b) (7)(C)  Fax No. (b) (6), (b) (7)(C)

#### WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.







REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

October 14, 2015

Anastasia Bacigalupo, Esq. West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-161753

Dear Ms. Bacigalupo:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310) 235-7805. If this Board agent is not available, you may contact Deputy Regional Attorney Anne J. White whose telephone number is (310) 235-7638.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, www.nlrb.gov, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor any request to place limitations on our use of position statements or evidence beyond those prescribed by the Freedom of Information Act and the Federal Records Act. Thus, we will not honor any claim of confidentiality except as provided by Exemption 4 of FOIA, 5 U.S.C. Sec. 552(b)(4), and any material you submit may be introduced as evidence at any hearing before an administrative law judge. We are also required by the Federal Records Act to keep copies of documents gathered in our investigation for some years after a case closes. Further, the Freedom of Information Act may require that we disclose such records in closed cases upon request, unless there is an applicable exemption. Examples of those exemptions are those that protect confidential financial information or personal privacy interests.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website, <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a> or from an NLRB office upon your request. NLRB Form 4541 offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin Regional Director

Mori Rubin

#### Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire





REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351

Fax: (310)235-7420

Download NLRB Mobile App

October 14, 2015



Re: West Side Center for Independent Living

Case 31-CA-161753

### Dear (b) (6), (b) (7)(C)

The charge that you filed in this case on October 08, 2015 has been docketed as case number 31-CA-161753. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310) 235-7805. If this Board agent is not available, you may contact Deputy Regional Attorney Anne J. White whose telephone number is (310) 235-7638.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or at the Regional office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

Presentation of Your Evidence: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website www.nlrb.gov. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website www.nlrb.gov or from the Regional Office upon your request. *NLRB Form 4541, Investigative Procedures* offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rusin

Mori Rubin Regional Director

### UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

### FIRST AMENDED CHARGE AGAINST EMPLOYER INSTRUCTIONS:

DO NOT WRITE	IN THIS SPACE
Case	Date Filed
31-CA-161753	3/11/2016

File an original of this charge with NLRB Regional	Director in which the alleged unfair labor prace	ctice occurred or is occurring.
a. Name of Employer	EMI COTENTIONING WITOM OTTANGE TO	b. Tel. No.
West Side Center for Independent Living		(310) 390-3611 ext 201
d Address (street site state 7ID ands)	La Frankria Bassacatativa	c. Cell No.
d. Address (street, city, state ZIP code)	e. Employer Representative	f. Fax No.
12901 Venice Blvd., Los Angeles, CA	Anastasia Bacigalupo, Esq.	(310) 390-4906
90066		g. e-Mail
		Anastasia@wcil.org h. Dispute Location (City and State)
[		Los Angeles, CA
i. Type of Establishment (factory, nursing home,	j. Principal Product or Service	k. Number of workers at dispute location
hotel)	j. Frincipal Froduct of Service	16
Non-profit disability rights organization	disability rights advocacy	10
		meaning of section 8(a), subsections (1), (3), (4), and
(5) of the National Labor Relations Act, and these unfair labor practices are unfair practices affecting	unfair labor practices are practices affecting of	commerce within the meaning of the Act, or these
2. Basis of the Charge (set forth a clear and conci		
(1) (0) (1) (7)(0) 1011		(L) (O) (L) (Z) (O)
On about (b) (6), (b) (7)(C) 2015, the ab		(b) (6), (b) (7)(C) due to Union
activities and because of participation	ation in a Board proceeding.	
	1	<b>.</b>
On about (b) (6) (b) (7)(C) 2015 the E		to the tendinose nelice with out
On about (b) (6), (b) (7)(C) 2015, the E		
providing the Union with notice or a	n opportunity to bargain, and the	Employer disciplined (b) (6), (b) (7)(C)
based on this unilateral change.		
Full name of party filing charge (if labor organiz	ation, give full name, including local name and	d number)
		u namati
Association of Professional Disable	ed Service Employees	
4a. Address (street and number, city, state, and Z	IP code)	4b. Tel. No.
		(b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)		4c. Cell No.
		(b) (6), (b) (7)(C)
		4d. Fax No.
		4e. e-Mail
F. Full page of actional or intermediated laborates	single of this is in a office as a constitution	(b) (6), (b) (7)(C)
organization)	nization of which it is an affiliate or constituen	t unit (to be filled in when charge is filed by a labor
organization,		
6. DECLARATION		Tel. No.
I declare that I have read the above charge a	ind that the statements are true to the best	of (b) (6), (b) (7)(C)
mly knowledge and benef.		Office, if any, Cell No.
<sub>ву:</sub> (b) (б), (b) (7)(С)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)
6), (b) (7)(C) rtale of representative of person making o	harge) Print Name and Title	Fax No.
		Fax No. (b) (6), (b) (7)(C)
Accuress: (b) (6), (b) (7)(C)	Date: 03/11/16	e-Mail
(b) (6), (b) (7)(C)(C)(C)	- 7/10/16	(b) (6), (b) (7)(C)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.





REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

March 11, 2016

Anastasia Bacigalupo, ESQ. West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-161753

Dear Ms. Bacigalupo:

Enclosed is a copy of the first amended charge that has been filed in this case.

<u>Investigator</u>: This charge is being investigated by Field Attorney CARLOS GONZALEZ whose telephone number is (310)235-7805. If the agent is not available, you may contact Supervisory Field Attorney JUAN C. OCHOA DIAZ whose telephone number is (310)235-7415.

<u>Presentation of Your Evidence</u>: As you know, we seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations in the first amended charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly.

**Procedures:** Your right to representation, the means of presenting evidence, and a description of our procedures, including how to submit documents, was described in the letter sent to you with the original charge in this matter. If you have any questions, please contact the Board agent.

Very truly yours,

Mori Rubin Regional Director

Mori Rubin

Enclosure: Copy of first amended charge





Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

March 11, 2016

(b) (6), (b) (7)(C)

**REGION 31** 

Association of Professional Disabled Service Employees

11500 W Olympic Blvd Ste 600

Los Angeles, CA 90064-1753

(b) (6), (b) (7)(C)

Re: West Side Center for Independent Living

Case 31-CA-161753

Dear (b) (6), (b) (7)(C)

We have docketed the first amended charge that you filed in this case.

<u>Investigator</u>: This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310) 235-7805. If the agent is not available, you may contact Supervisory Field Attorney Juan C. Ochoa Diaz whose telephone number is (310) 235-7415.

<u>Presentation of Your Evidence</u>: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. If you have additional evidence regarding the allegations in the first amended charge and you have not yet scheduled a date and time for the Board agent to obtain that evidence, please contact the Board agent to arrange to present that evidence. If you fail to cooperate in promptly presenting your evidence, your charge may be dismissed.

**Procedures:** Your right to representation, the means of presenting evidence, and a description of our procedures, including how to submit documents, was described in the letter sent to you with the original charge in this matter. If you have any questions, please contact the Board agent.

Very truly yours,

Mori Rubin

Mori Rubin Regional Director Form NLRB - 501 (2-08)

## UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST EMPLOYER

11107	FIONS:

 DO NOT WRITE IN THIS SPACE

 Case
 Date Filed

 31-CA-161758
 10/8/2015

	Director in which the alleged unfair labor practice oc	
a. Name of Employer	EMPLOYER AGAINST WHOM CHARGE IS BROUG	
West Side Center for Independent Living		(b) (6), (b) (7)(C)
d. Address (street, city, state ZIP code)	e. Employer Representative	c. Cell No.
12901 Venice Blvd., Los Angeles, CA	(b) (6), (b) (7)(C)	(310) 390-4906
90066		g. e-Mail (b) (6), (b) (7)(C) (2) wcil.org
		h. Dispute Location (City and State) Los Angeles, CA
i. Type of Establishment (factory, nursing home,	j. Principal Product or Service	k. Number of workers at dispute location
hotel)   Non-profit disability rights organization	disability rights advocacy	16
	is engaging unfair labor practices within the meaning	up of caction R(a) subsections (1) of the
National Labor Relations Act, and these unfair labor practices are unfair practices affecting commerce	or practices are practices affecting commerce within within the meaning of the Act and the Postal Reorga	the meaning of the Act, or these unfair labor nization Act.
Basis of the Charge (set forth a clear and concise)	se statement of the facts constituting the alleged unfa	air labor practices)
On about August 20 and August 21	2015 the above named Employer by	supervisor (b) (6) (b) (7)(C)
	2015, the above-named Employer, by s	
,	ees to discourage employees from enga	iging in protected concerted
activity and from filing charges with	the Board.	
0 1 14 120 14 121	2015 1	(b) (c) (b) (7)(c)
On about August 20 and August 21,	2015, the above-named Employer, by s	supervisor (D) (6), (D) $(7)(C)$ ,
1 1	ne for having filed and/or planning to f	file charges with the Board or
other governmental agencies.		
0 F. II		
	ation, give full name, including local name and number	er)
Association of Professional Disable		er)
Association of Professional Disable	ed Service Employees	er)
	ed Service Employees	4b. Tel. No.
Association of Professional Disable  4a. Address (street and number, city, state, and Zi	ed Service Employees	4b. Tel. No. (858) 361-7533
Association of Professional Disable	ed Service Employees	4b. Tel. No. (858) 361-7533 4c. Cell No.
Association of Professional Disable  4a. Address (street and number, city, state, and Zi	ed Service Employees	4b. Tel. No. (858) 361-7533 4c. Cell No. (858) 361-7533
Association of Professional Disable  4a. Address (street and number, city, state, and Zi	ed Service Employees	4b. Tel. No. (858) 361-7533 4c. Cell No.
Association of Professional Disable  4a. Address (street and number, city, state, and Zi	ed Service Employees	4b. Tel. No. (858) 361-7533 4c. Cell No. (858) 361-7533 4d. Fax No. (323) 746-5512 4e. e-Mail
Association of Professional Disable  4a. Address (street and number, city, state, and Zi  1375 Sierra Bonita Suite #1, Los Angeles,	ed Service Employees  P code) California 90019	4b. Tel. No. (858) 361-7533 4c. Cell No. (858) 361-7533 4d. Fax No. (323) 746-5512 4e. e-Mail jeffmichaelson@hotmail.com
Association of Professional Disable  4a. Address (street and number, city, state, and Zi  1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor orga	ed Service Employees	4b. Tel. No. (858) 361-7533 4c. Cell No. (858) 361-7533 4d. Fax No. (323) 746-5512 4e. e-Mail jeffmichaelson@hotmail.com
Association of Professional Disable  4a. Address (street and number, city, state, and Zi  1375 Sierra Bonita Suite #1, Los Angeles,	ed Service Employees  P code) California 90019	4b. Tel. No. (858) 361-7533 4c. Cell No. (858) 361-7533 4d. Fax No. (323) 746-5512 4e. e-Mail jeffmichaelson@hotmail.com
Association of Professional Disable  4a. Address (street and number, city, state, and Zl  1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)	ed Service Employees  P code) California 90019	4b. Tel. No. (858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com o be filled in when charge is filed by a labor
Association of Professional Disable  4a. Address (street and number, city, state, and Zl  1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)  6. DECLARATION	ed Service Employees  P code)  California 90019  nization of which it is an affiliate or constituent unit (to	4b. Tel. No. (858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com o be filled in when charge is filed by a labor  Tel. No.
Association of Professional Disable  4a. Address (street and number, city, state, and Zl  1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)  6. DECLARATION	ed Service Employees  P code) California 90019	4b. Tel. No. (858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com o be filled in when charge is filed by a labor  Tel. No. (858) 361-7533
Association of Professional Disable  4a. Address (street and number, city, state, and Zi  1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge a my knowledge and belief.	nization of which it is an affiliate or constituent unit (to	4b. Tel. No. (858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com o be filled in when charge is filed by a labor  Tel. No. (858) 361-7533  Office, if any, Cell No.
Association of Professional Disable  4a. Address (street and number, city, state, and Zi  1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor orga organization)  6. DECLARATION I declare that I have read the above charge a	nization of which it is an affiliate or constituent unit (to	4b. Tel. No. (858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com o be filled in when charge is filed by a labor  Tel. No. (858) 361-7533
Association of Professional Disable  4a. Address (street and number, city, state, and Zi  1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge a my knowledge and belief.	nization of which it is an affiliate or constituent unit (to state the statements are true to the best of large)  Jeff Michaelson  Jeff Michaelson  Jaje ( VW) - Course Specific Specif	4b. Tel. No. (858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com o be filled in when charge is filed by a labor  Tel. No. (858) 361-7533  Office, if any, Cell No. (858) 361-7533  Fax No.
Association of Professional Disable  4a. Address (street and number, city, state, and Zi  1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge a my knowledge and trailef.  By:  (signature of representative or person making compared to the signature of representative or person making compared to the signature of representative or person making compared to the signature of representative or person making compared to the signature of representative or person making compared to the signature of representative or person making compared to the signature of representative or person making compared to the signature of representative or person making compared to the signature of representative or person making compared to the signature of representative or person making compared to the signature of the signatu	nization of which it is an affiliate or constituent unit (to state the statements are true to the best of large)  Jeff Michaelson  Jeff Michaelson  Jaje ( VW) - Course Specific Specif	4b. Tel. No. (858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com o be filled in when charge is filed by a labor  Tel. No. (858) 361-7533  Office, if any, Cell No. (858) 361-7533  Fax No. (323) 746-5512
Association of Professional Disable  4a. Address (street and number, city, state, and Zi  1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge a my knowledge and belief.  By:	nization of which it is an affiliate or constituent unit (to	4b. Tel. No. (858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com o be filled in when charge is filed by a labor  Tel. No. (858) 361-7533  Office, if any, Cell No. (858) 361-7533  Fax No.

### WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.





REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753

Agency Website: www.nlrb.gov Telephone: (310)235-7351

Fax: (310)235-7420

**NLRB** Mobile App

October 13, 2015

(b) (6), (b) (7)(C)

West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

> West Side Center for Independent Living Re:

> > Case 31-CA-161758

Dear (b) (6), (b) (7)(C):

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

**Investigator:** This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310)235-7805. If this Board agent is not available, you may contact Deputy Regional Attorney Anne J. White whose telephone number is (310)235-7638.

**Right to Representation:** You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, www.nlrb.gov, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

**Presentation of Your Evidence:** We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor any request to place limitations on our use of position statements or evidence beyond those prescribed by the Freedom of Information Act and the Federal Records Act. Thus, we will not honor any claim of confidentiality except as provided by Exemption 4 of FOIA, 5 U.S.C. Sec. 552(b)(4), and any material you submit may be introduced as evidence at any hearing before an administrative law judge. We are also required by the Federal Records Act to keep copies of documents gathered in our investigation for some years after a case closes. Further, the Freedom of Information Act may require that we disclose such records in closed cases upon request, unless there is an applicable exemption. Examples of those exemptions are those that protect confidential financial information or personal privacy interests.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website, <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a> or from an NLRB office upon your request. NLRB Form 4541 offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin

Mori Rubin Regional Director

#### Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire





REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

October 13, 2015

Jeff Michaelson Association of Professional Disabled Service Employees 1375 S Sierra Bonita Ave., Suite 1 Los Angeles, CA 90019-2505

Re: West Side Center for Independent Living

Case 31-CA-161758

Dear Mr. Michaelson:

The charge that you filed in this case on October 08, 2015 has been docketed as case number 31-CA-161758. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310)235-7805. If this Board agent is not available, you may contact Deputy Regional Attorney Anne J. White whose telephone number is (310)235-7638.

**Right to Representation:** You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or at the Regional office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website www.nlrb.gov. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website www.nlrb.gov or from the Regional Office upon your request. *NLRB Form 4541, Investigative Procedures* offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin

Mori Rubin Regional Director

### UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

#### CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE	IN THIS SPACE	_
Case	Date Filed	
31-CA-162423	10/20/15	

File an original of this charge with NLRB Regional	Director in which the alleged unfair labor practice of	occurred or is occurring.
	EMPLOYER AGAINST WHOM CHARGE IS BROU	
a. Name of Employer West Side Conton for Independent Living		b. Tel. No.
West Side Center for Independent Living		(310) 390-3611 ext 201
d. Address (street, city, state ZIP code)	a Employer Bearscontation	c. Cell No. f. Fax No.
	e. Employer Representative	
12901 Venice Blvd., Los Angeles, CA	Anastasia Bacigalupo, Esq.	(310) 390-4906
90066		g. e-Mail
		Anastasia@wcil.org
		h. Dispute Location (City and State)
		Los Angeles, CA
<ul> <li>Type of Establishment (factory, nursing home, hotel)</li> </ul>	j. Principal Product or Service	k. Number of workers at dispute location
,	disability rights advaceasy	16
Non-profit disability rights organization	disability rights advocacy	
I. The above-named employer has engaged in and	lis engaging unfair labor practices within the mean	ning of section 8(a), subsections (1), (3), and (4)
of the National Labor Relations Act, and these unfalabor practices are unfair practices affecting comm		
Basis of the Charge (set forth a clear and concise)		
a. Dado of the oneige (Set forth a clear and concis	so statement of the racts constituting the alleged th	maii labol piacticas)
On about (b) (6), (b) (7)(C) 2015, the above	-named Employer retaliated against a	employee (b) (6), (b) (7)(C) by
2013, the above	-named Employer retainated against e	inproyee to to to to to
	ppraisal due to of Union activities an	nd because of activity with the
Board.	<del></del>	_
	ation, give full name, including local name and num	nber)
3. Full name of party filing charge (if labor organizal Association of Professional Disable		nber)
		nber)
Association of Professional Disable	ed Service Employees	
	ed Service Employees	4b. Tel. No.
Association of Professional Disable  4a. Address (street and number, city, state, and ZI	ed Service Employees	4b. Tel. No. (b) (6), (b) (7)(C)
Association of Professional Disable	ed Service Employees	4b. Tel. No. (b) (6), (b) (7)(C) 4c. Cell No
Association of Professional Disable  4a. Address (street and number, city, state, and ZI	ed Service Employees	4b. Tel. No. (b) (6), (b) (7)(C)  4c. Cell No (b) (6), (b) (7)(C)
Association of Professional Disable  4a. Address (street and number, city, state, and ZI	ed Service Employees	4b. Tel. No. (b) (6), (b) (7)(C)  4c. Cell No (b) (6), (b) (7)(C)  4d. Fax No.
Association of Professional Disable  4a. Address (street and number, city, state, and ZI	ed Service Employees	4b. Tel. No. (b) (6), (b) (7)(C)  4c. Cell No (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)
Association of Professional Disable  4a. Address (street and number, city, state, and ZI	ed Service Employees	4b. Tel. No. (b) (6), (b) (7)(C)  4c. Cell No (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail
Association of Professional Disable  4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)	ed Service Employees	4b. Tel. No. (b) (6), (b) (7)(C)  4c. Cell No (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)
Association of Professional Disable  4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)  5. Full name of national or international labor organ	ed Service Employees	4b. Tel. No. (b) (6), (b) (7)(C)  4c. Cell No (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)
Association of Professional Disable  4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)	ed Service Employees	4b. Tel. No. (b) (6), (b) (7)(C)  4c. Cell No (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)
Association of Professional Disable  4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)  5. Full name of national or international labor organ	ed Service Employees	4b. Tel. No. (b) (6), (b) (7)(C)  4c. Cell No (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)
Association of Professional Disable  4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION	ed Service Employees P code)  nization of which it is an affiliate or constituent unit	4b. Tel. No. (b) (6), (b) (7)(C)  4c. Cell No (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)
Association of Professional Disable  4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have	ed Service Employees P code)  nization of which it is an affiliate or constituent unit	4b. Tel. No. (b) (6), (b) (7)(C)  4c. Cell No (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  (to be filled in when charge is filed by a labor  Tel. No.
Association of Professional Disable  4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION	ed Service Employees	4b. Tel. No. (b) (6), (b) (7)(C)  4c. Cell No (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  (to be filled in when charge is filed by a labor  Tel. No. (b) (6), (b) (7)(C)
Association of Professional Disable  4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have	ed Service Employees  P code)  nization of which it is an affiliate or constituent unit  and that the statements are true to the best of	4b. Tel. No. (b) (6), (b) (7)(C)  4c. Cell No (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  (to be filled in when charge is filed by a labor  Tel. No. (b) (6), (b) (7)(C)  Office, if any, Cell No.
Association of Professional Disable  4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have	ed Service Employees P code)  nization of which it is an affiliate or constituent unit	4b. Tel. No. (b) (6), (b) (7)(C)  4c. Cell No (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  (to be filled in when charge is filed by a labor  Tel. No. (b) (6), (b) (7)(C)
Association of Professional Disable  4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have my knowledge and (b) (6), (b) (7)(C) ove charge and (b) (6), (b) (7)(C)	ed Service Employees  P code)  nization of which it is an affiliate or constituent unit  and that the statements are true to the best of (b) (6), (b) (7)(C)	4b. Tel. No. (b) (6), (b) (7)(C)  4c. Cell No (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  (to be filled in when charge is filed by a labor  Tel. No. (b) (6), (b) (7)(C)  Office, if any, Cell No. (b) (6), (b) (7)(C)
Association of Professional Disable  4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have	ed Service Employees  P code)  nization of which it is an affiliate or constituent unit  and that the statements are true to the best of (b) (6), (b) (7)(C)	4b. Tel. No. (b) (6), (b) (7)(C)  4c. Cell No (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  (to be filled in when charge is filed by a labor  Tel. No. (b) (6), (b) (7)(C)  Office, if any, Cell No. (b) (6), (b) (7)(C)  Fax No.
Association of Professional Disable  4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have my knowledge and (b) (6), (b) (7)(C) ove charge and (b) (6), (b) (7)(C)  By: (b) (6), (b) (7)(C) ove charge and (b) (6), (b) (7)(C)  By: (c) (6), (c) (7)(C) ove charge and (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	ed Service Employees  P code)  nization of which it is an affiliate or constituent unit  and that the statements are true to the best of 7)(C)  (b) (6), (b) (7)(C)  harge)  Print Name and Title	4b. Tel. No. (b) (6), (b) (7)(C)  4c. Cell No (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  (to be filled in when charge is filed by a labor  Tel. No. (b) (6), (b) (7)(C)  Office, if any, Cell No. (b) (6), (b) (7)(C)  Fax No. (b) (6), (b) (7)(C)
Association of Professional Disable  4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have my knowledge and (b) (6), (b) (7)(C) ove charge and (b) (6), (b) (7)(C)	ed Service Employees  P code)  nization of which it is an affiliate or constituent unit  and that the statements are true to the best of (b) (6), (b) (7)(C)	4b. Tel. No. (b) (6), (b) (7)(C)  4c. Cell No (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  (to be filled in when charge is filed by a labor  Tel. No. (b) (6), (b) (7)(C)  Office, if any, Cell No. (b) (6), (b) (7)(C)  Fax No.

### WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.







REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

October 22, 2015

Anastasia Bacigalupo, ESQ. West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-162423

Dear Ms. Bacigalupo:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310) 235-7805. If this Board agent is not available, you may contact Deputy Regional Attorney Anne J. White whose telephone number is (310) 235-7638.

<u>Right to Representation</u>: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, www.nlrb.gov, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not enough to be

considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor any request to place limitations on our use of position statements or evidence beyond those prescribed by the Freedom of Information Act and the Federal Records Act. Thus, we will not honor any claim of confidentiality except as provided by Exemption 4 of FOIA, 5 U.S.C. Sec. 552(b)(4), and any material you submit may be introduced as evidence at any hearing before an administrative law judge. We are also required by the Federal Records Act to keep copies of documents gathered in our investigation for some years after a case closes. Further, the Freedom of Information Act may require that we disclose such records in closed cases upon request, unless there is an applicable exemption. Examples of those exemptions are those that protect confidential financial information or personal privacy interests.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website, <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a> or from an NLRB office upon your request. NLRB Form 4541 offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin

Mori Rubin Regional Director

#### Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire





REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753

Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420

Download **NLRB** Mobile App

October 22, 2015

(b) (6), (b) (7)(C)

Association of Professional Disabled Service Employees (b) (6), (b) (7)(C)

West Side Center for Independent Living Re:

Case 31-CA-162423

Dear (b) (6), (b) (7)(C):

The charge that you filed in this case on October 20, 2015 has been docketed as case number 31-CA-162423. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

**Investigator:** This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310) 235-7805. If this Board agent is not available, you may contact Deputy Regional Attorney Anne J. White whose telephone number is (310) 235-7638.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, www.nlrb.gov, or at the Regional office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

**Presentation of Your Evidence:** As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website www.nlrb.gov. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website www.nlrb.gov or from the Regional Office upon your request. *NLRB Form 4541, Investigative Procedures* offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin

Mori Rubin Regional Director



REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420

March 29, 2016

(b) (6), (b) (7)(C)

Association of Professional Disabled Service Employees
(b) (6), (b) (7)(C)

Re: West Side Center for Independent Living

Case 31-CA-162423

### Dear (b) (6), (b) (7)(C)

We have carefully investigated and considered your charge that West Side Center for Independent Living has violated the National Labor Relations Act.

**Decision to Dismiss:** Based on that investigation, I have decided to dismiss your charge in its entirety because there is insufficient evidence to establish a violation of the Act as alleged.

Your Right to Appeal: You may appeal my decision to the General Counsel of the National Labor Relations Board, through the Office of Appeals. If you appeal, you may use the enclosed Appeal Form, which is also available at <a href="www.nlrb.gov">www.nlrb.gov</a>. However, you are encouraged to also submit a complete statement of the facts and reasons why you believe my decision was incorrect.

Means of Filing: An appeal may be filed electronically, by mail, by delivery service, or hand-delivered. Filing an appeal electronically is preferred but not required. The appeal MAY NOT be filed by fax or email. To file an appeal electronically, go to the Agency's website at <a href="https://www.nlrb.gov">www.nlrb.gov</a>, click on E-File Documents, enter the NLRB Case Number, and follow the detailed instructions. To file an appeal by mail or delivery service, address the appeal to the General Counsel at the National Labor Relations Board, Attn: Office of Appeals, 1015 Half Street SE, Washington, DC 20570-0001. Unless filed electronically, a copy of the appeal should also be sent to me.

Appeal Due Date: The appeal is due on April 12, 2016. If the appeal is filed electronically, the transmission of the entire document through the Agency's website must be completed no later than 11:59 p.m. Eastern Time on the due date. If filing by mail or by delivery service an appeal will be found to be timely filed if it is postmarked or given to a delivery service no later than April 11, 2016. If an appeal is postmarked or given to a delivery service on the due date, it will be rejected as untimely. If hand delivered, an appeal must be received by the General Counsel in Washington D.C. by 5:00 p.m. Eastern Time on the appeal due date. If an appeal is not submitted in accordance with this paragraph, it will be rejected.

Extension of Time to File Appeal: The General Counsel may allow additional time to file the appeal if the Charging Party provides a good reason for doing so and the request for an extension of time is received on or before April 12, 2016. The request may be filed electronically through the *E-File Documents* link on our website www.nlrb.gov, by fax to (202)273-4283, by mail, or by delivery service. The General Counsel will not consider any request for an extension of time to file an appeal received after April 12, 2016, even if it is postmarked or given to the delivery service before the due date. Unless filed electronically, a copy of the extension of time should also be sent to me.

Confidentiality: We will not honor any claim of confidentiality or privilege or any limitations on our use of appeal statements or supporting evidence beyond those prescribed by the Federal Records Act and the Freedom of Information Act (FOIA). Thus, we may disclose an appeal statement to a party upon request during the processing of the appeal. If the appeal is successful, any statement or material submitted with the appeal may be introduced as evidence at a hearing before an administrative law judge. Because the Federal Records Act requires us to keep copies of case handling documents for some years after a case closes, we may be required by the FOIA to disclose those documents absent an applicable exemption such as those that protect confidential sources, commercial/financial information, or personal privacy interests.

Very truly yours,

Brian Gee

Acting Regional Director

#### Enclosure

cc: Anastasia Bacigalupo, ESQ.

West Side Center for Independent Living

12901 Venice Blvd

Los Angeles, CA 90066-3509

Form NLRB - 501 (2-08)

### UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

#### **CHARGE AGAINST EMPLOYER**

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
31-CA-163428	11/4/2015

File an original of this charge with NLRB Regional	Director in which the alleged unfair labor practice of	curred or is occurring.
	EMPLOYER AGAINST WHOM CHARGE IS BROUG	
a. Name of Employer		b. Tel. No. (310) 390-3611 ext 201
West Side Center for Independent Living		c. Cell No.
d. Address (street, city, state ZIP code)	e. Employer Representative	f. Fax No.
12901 Venice Blvd., Los Angeles, CA	Anastasia Bacigalupo, Esq.	(310) 390-4906
, ,	Anastasia bacigatupo, Esq.	
90066		g. e-Mail
		Anastasia@wcil.org h. Dispute Location (City and State)
i. Type of Establishment (factory, nursing home,	j. Principal Product or Service	Los Angeles, CA k. Number of workers at dispute location
hotel)	j. Principal Product of Service	16
Non-profit disability rights organization	disability rights advocacy	10
	is engaging unfair labor practices within the meaning	og of section 8(a) subsections (1) and (5) of
the National Labor Relations Act, and these unfair	labor practices are practices affecting commerce wi	thin the meaning of the Act, or these unfair
labor practices are unfair practices affecting comm	erce within the meaning of the Act and the Postal R	eorganization Act.
2. Basis of the Charge (set forth a clear and concis	se statement of the facts constituting the alleged unf	air labor practices)
Within the past six months, the above	e-named Employer has engaged in ove	rall bad faith bargaining during
first contract negotiations with the Un		
3. Full name of party filing charge (if labor organiza	tion, give full name, including local name and numb	er)
Association of Professional Disable	ed Service Employees	
	1 2	
4a. Address (street and number, city, state, and ZI	P code)	4b. Tel. No.
4a. Modress (Street and Hamber, only, State, and Er	· code,	(858) 361-7533
1255 61	G NG 1 00010	4c. Cell No.
1375 Sierra Bonita Suite #1, Los Angeles,	California 90019	(858) 361-7533
		4d. Fax No.
		(323) 746-5512
		4e. e-Mail
		jeffmichaelson@hotmail.com
5. Full name of national or international labor organ	nization of which it is an affiliate or constituent unit (t	to be filled in when charge is filed by a labor
organization)	nearlon of which it is all allimate of constituent and the	o be miled in which sharge is mod by a radio.
,		
		1
6. DECLARATION	data data and a data and a data data dat	Tel. No.
I declare that I have read the above charge at	nd that the statements are true to the best of	(858) 361-7533
my knowledge and bellef.		Office, if any, Cell No.
By:	Jeff Michaelson	(858) 361-7533
	voi miemasissii	(000) 001-7000
(signature of representative or person making ch	narge) Print Name and Title	Fax No.
		(323) 746-5512
Address: 1375 Sierra Bonita Suite #1, Los	Date: 11/04/15	e-Mail
Angeles, California 90019	***	jeffmichaelson@hotmail.com

### WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.





Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

November 5, 2015

Jeff Michaelson Association of Professional Disabled Service Employees 1375 S Sierra Bonita Ave., Suite 1 Los Angeles, CA 90019-2505

11500 W Olympic Blvd Ste 600

Los Angeles, CA 90064-1753

Re: West Side Center for Independent Living

Case 31-CA-163428

Dear Mr. Michaelson:

REGION 31

The charge that you filed in this case on November 04, 2015 has been docketed as case number 31-CA-163428. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310)235-7805. If this Board agent is not available, you may contact Deputy Regional Attorney Anne J. White whose telephone number is (310)235-7638.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or at the Regional office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website www.nlrb.gov. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website www.nlrb.gov or from the Regional Office upon your request. *NLRB Form 4541, Investigative Procedures* offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin

Mori Rubin Regional Director



REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

November 5, 2015

Anastasia Bacigalupo, Esq. West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-163428

Dear Ms. Bacigalupo:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310)235-7805. If this Board agent is not available, you may contact Deputy Regional Attorney Anne J. White whose telephone number is (310)235-7638.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, www.nlrb.gov, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

Presentation of Your Evidence: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly. Due to the nature of the allegations in the enclosed unfair labor practice charge, we have identified this case as one in which injunctive relief pursuant to Section 10(j) of the Act may be appropriate. Therefore, in addition to investigating the merits of the unfair labor practice allegations, the Board agent will also inquire into those factors relevant to making a determination as to whether or not 10(j) injunctive relief is appropriate in this case. Accordingly, please include your position on the appropriateness of Section 10(j) relief when you submit your evidence relevant to the investigation.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor any request to place limitations on our use of position statements or evidence beyond those prescribed by the Freedom of Information Act and the Federal Records Act. Thus, we will not honor any claim of confidentiality except as provided by Exemption 4 of FOIA, 5 U.S.C. Sec. 552(b)(4), and any material you submit may be introduced as evidence at any hearing before an administrative law judge. We are also required by the Federal Records Act to keep copies of documents gathered in our investigation for some years after a case closes. Further, the Freedom of Information Act may require that we disclose such records in closed cases upon request, unless there is an applicable exemption. Examples of those exemptions are those that protect confidential financial information or personal privacy interests.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website, <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a> or from an NLRB office upon your request. NLRB Form 4541 offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin Regional Director

Mori Rubin

#### Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire



REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420

March 29, 2016

Anastasia Bacigalupo, Esq. West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re:

West Side Center for Independent Living

Case 31-CA-163428

Dear Ms. Bacigalupo:

This is to advise you that I have approved the withdrawal of the charge in the above matter.

Very truly yours,

Brian Gee

Acting Regional Director

cc: Jeff Michaelson, President

Association of Professional Disabled

Service Employees

1375 S Sierra Bonita Avenue, Suite 1

Los Angeles, CA 90019-2505

Form NLRB - 501 (2-08)

#### UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE

Case Date Filed

31-CA-163429 11/4/2015

File an original of this charge with NLRB Regional	Director in which the alleged unfair labor practice of	ccurred or is occurring.
1.	EMPLOYER AGAINST WHOM CHARGE IS BROU	IGHT
a. Name of Employer		b. Tel. No.
West Side Center for Independent Living		(310) 390-3611 ext 201
		c. Cell No.
d. Address (street, city, state ZIP code)	e. Employer Representative	f. Fax No.
12901 Venice Blvd., Los Angeles, CA	Anastasia Bacigalupo, Esq.	(310) 390-4906
90066		g. e-Mail
		Anastasia@wcil.org
		h. Dispute Location (City and State)
		Los Angeles, CA
i. Type of Establishment (factory, nursing home,	j. Principal Product or Service	k. Number of workers at dispute location
hotel)	disability viahta advasses	16
Non-profit disability rights organization	disability rights advocacy	1 (1) (2) (1) (2) (1) (3)
	I is engaging unfair labor practices within the meani air labor practices are practices affecting commerce	
	air labor practices are practices affecting commerce terce within the meaning of the Act and the Postal F	
2. Basis of the Charge (set forth a clear and concis	se statement of the facts constituting the alleged un	fair labor practices)
		,,
On (b) (6), (b) $(7)(C)$ 2015, the above par	ned Employer retaliated against emplo	ovee (b) (6), (b) (7)(C) by giving
	l due to other Union activities and becau	
a poor job performance appraisa	Official activities and becat	activity with the board.
3. Full name of party filing charge (if labor organiza	ation, give full name, including local name and numb	ber)
Association of Professional Disable		,
Association of Floressional Disable	on betwice Employees	
4a. Address (street and number, city, state, and Z	P code)	4b. Tel. No.
		(b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)		4c. Cell No.
		(b) (6), (b) (7)(C)
		4d. Fax No.
		(b) (6), (b) (7)(C)
		4e. e-Mail
		(b) (6), (b) (7)(C)
	nization of which it is an affiliate or constituent unit (	to be filled in when charge is filed by a labor
organization)		
(b) (6) (b) (7)(C)		
(b) (6), (b) (7)(C) 6. DECLARATION		Tel. No.
	nd that the statements are true to the best of	(b) (6), (b) (7 (C)
my knowledge ar		
(b) (6) (b) (7)(C)		Office, if any, Cell No.
$B_{ij}(\mathbf{O})$	(b) (6), (b) (7)(C)	(b) (6), (b) (7 (C)
) (6), (b) (7)(C) (b) (5) (b) (		
rature <sup>(0) (6), (0)</sup> fresentative or person making c	Drint Name and Title	For No
	harge) Print Name and Title	Fax No.
(b) (c) (b) ( <del>7</del> )(0)		(b) (6), (b) (7)(C)
Address: (b) (6), (b) (7)(C)		(b) (6), (b) (7)(C) e-Mail
Address: (b) (6), (b) (7)(C)	Print Name and Title  Date: -///-3/ j.f.	(b) (6), (b) (7)(C)

### WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.





Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420

Download NLRB Mobile App

November 5, 2015



11500 W Olympic Blvd Ste 600

Los Angeles, CA 90064-1753

Re: West Side Center for Independent Living

Case 31-CA-163429

### Dear (b) (6), (b) (7)(C)

REGION 31

The charge that you filed in this case on November 04, 2015 has been docketed as case number 31-CA-163429. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310)235-7805. If this Board agent is not available, you may contact Deputy Regional Attorney Anne J. White whose telephone number is (310)235-7638.

**Right to Representation:** You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or at the Regional office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website www.nlrb.gov. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website www.nlrb.gov or from the Regional Office upon your request. *NLRB Form 4541, Investigative Procedures* offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin

Mori Rubin Regional Director





REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420

Download NLRB Mobile App

November 5, 2015

Anastasia Bacigalupo, Esq. West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-163429

Dear Ms. Bacigalupo:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310)235-7805. If this Board agent is not available, you may contact Deputy Regional Attorney Anne J. White whose telephone number is (310)235-7638.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, www.nlrb.gov, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

Presentation of Your Evidence: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly. Due to the nature of the allegations in the enclosed unfair labor practice charge, we have identified this case as one in which injunctive relief pursuant to Section 10(j) of the Act may be appropriate. Therefore, in addition to investigating the merits of the unfair labor practice allegations, the Board agent will also inquire into those factors relevant to making a determination as to whether or not 10(j) injunctive relief is appropriate in this case. Accordingly, please include your position on the appropriateness of Section 10(j) relief when you submit your evidence relevant to the investigation.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor any request to place limitations on our use of position statements or evidence beyond those prescribed by the Freedom of Information Act and the Federal Records Act. Thus, we will not honor any claim of confidentiality except as provided by Exemption 4 of FOIA, 5 U.S.C. Sec. 552(b)(4), and any material you submit may be introduced as evidence at any hearing before an administrative law judge. We are also required by the Federal Records Act to keep copies of documents gathered in our investigation for some years after a case closes. Further, the Freedom of Information Act may require that we disclose such records in closed cases upon request, unless there is an applicable exemption. Examples of those exemptions are those that protect confidential financial information or personal privacy interests.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website, <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a> or from an NLRB office upon your request. NLRB Form 4541 offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin Regional Director

Mori Rubin

#### Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire



REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420

March 29, 2016

Anastasia Bacigalupo, Esq. West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-163429

Dear Ms. Bacigalupo:

This is to advise you that I have approved the withdrawal of the charge in the above matter.

Very truly yours,

Brian Gee

Acting Regional Director

cc: (b) (6), (b) (7)(C)
Association of Professional Disabled

Service Employees

(b) (6), (b) (7)(C)

Form NLRB - 501 (2-08)

### UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

**CHARGE AGAINST EMPLOYER** 

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE

Case Date Filed

31-CA-163430 11/4/15

File an original of this charge with NLRB Regional	Director in which the alleged unfair labor practice of	ocurred or is occurring.
1.	EMPLOYER AGAINST WHOM CHARGE IS BROU	GHT
a. Name of Employer		b. Tel. No.
West Side Center for Independent Living		(310) 390-3611 ext 201
,		c. Cell No.
d. Address (street, city, state ZIP code)	e. Employer Representative	f. Fax No.
12901 Venice Blvd., Los Angeles, CA	Anastasia Bacigalupo, Esq.	(310) 390-4906
90066	g., , , ,	g. e-Mail
70000		Anastasia@wcil.org
		h. Dispute Location (City and State)
		Los Angeles, CA
i. Type of Establishment (factory, nursing home,	j. Principal Product or Service	k. Number of workers at dispute location
hotel)	j. Principal Product of Gervice	16
Non-profit disability rights organization	disability rights advocacy	10
	d is engaging unfair labor practices within the meaning	ng of section 8(a), subsections (1), and (5) of
the National Labor Relations Act, and these unfair	labor practices are practices affecting commerce w	ithin the meaning of the Act, or these unfair
	nerce within the meaning of the Act and the Postal R	
	se statement of the facts constituting the alleged uni	
<b>"</b>		
Within the past six months, the above	e-named Employer has given employe	es notices that they will no
	ted park spaces without giving the Uni	
, ,	ted park spaces without giving the Oni	on with hotice of an opportunity
bargain or the decision.		
XXXIAL in the count air an anti-	d Duudayaa kaa aliminatad tuua	noid days off during the heliday
1	e named Employer has eliminated two	
period that were previously provided	to employees without giving the Unic	on notice and an opportunity to
bargain.		• • • •
ourgum,		
	ation, give full name, including local name and numb	per)
Association of Professional Disable	ed Service Employees	
	• •	
4a. Address (street and number, city, state, and ZI	ID code)	4b. Tel. No.
4a. Address (street and number, city, state, and 2i	ir code)	
		(858) 361-7533
1375 Sierra Bonita Suite #1, Los Angeles,	, California 90019	4c. Cell No.
1		(858) 361-7533
1		4d. Fax No.
		(323) 746-5512
		4e. e-Mail
		jeffmichaelson@hotmail.com
	nization of which it is an affiliate or constituent unit (	to be filled in when charge is filed by a labor
organization)		
6. DECLARATION		Tel. No.
	nd that the statements are true to the best of	(858) 361-7533
my knowledge and belief		(656) 501-7555
arment - interest -		Office, if any, Cell No.
By:	Jeff Michaelson	(858) 361-7533
		<u> </u>
(signature of representative of person making c	harge) Print Name and Title	Fax No.
		(323) 746-5512
Address: 1375 Sierra Bonita Suite #1, Los	Date: 11/e4/15	e-Mail
Angeles, California 90019	11/29/13	jeffmichaelson@hotmail.com
i ingolog cultoffild /001/		· · · · · · · · · · · · · · · · · · ·

### WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.





REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

November 5, 2015

Anastasia Bacigalupo, Esq. West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-163430

Dear Ms. Bacigalupo:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310) 235-7805. If this Board agent is not available, you may contact Deputy Regional Attorney Anne J. White whose telephone number is (310) 235-7638.

<u>Right to Representation</u>: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, www.nlrb.gov, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

Presentation of Your Evidence: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly. Due to the nature of the allegations in the enclosed unfair labor practice charge, we have identified this case as one in which injunctive relief pursuant to Section 10(j) of the Act may be appropriate.

Therefore, in addition to investigating the merits of the unfair labor practice allegations, the Board agent will also inquire into those factors relevant to making a determination as to whether

or not 10(j) injunctive relief is appropriate in this case. Accordingly, please include your position on the appropriateness of Section 10(j) relief when you submit your evidence relevant to the investigation.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor any request to place limitations on our use of position statements or evidence beyond those prescribed by the Freedom of Information Act and the Federal Records Act. Thus, we will not honor any claim of confidentiality except as provided by Exemption 4 of FOIA, 5 U.S.C. Sec. 552(b)(4), and any material you submit may be introduced as evidence at any hearing before an administrative law judge. We are also required by the Federal Records Act to keep copies of documents gathered in our investigation for some years after a case closes. Further, the Freedom of Information Act may require that we disclose such records in closed cases upon request, unless there is an applicable exemption. Examples of those exemptions are those that protect confidential financial information or personal privacy interests.

**Procedures:** We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website, <a href="www.nlrb.gov">www.nlrb.gov</a>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a> or from an NLRB office upon your request. NLRB Form 4541 offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Mori Rubin

Very truly yours,

Mori Rubin Regional Director

#### Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire





Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

November 5, 2015

Jeff Michaelson Association of Professional Disabled Service Employees 1375 S Sierra Bonita Ave Suite 1 Los Angeles, CA 90019-2505

11500 W Olympic Blvd Ste 600

Los Angeles, CA 90064-1753

Re: West Side Center for Independent Living

Case 31-CA-163430

Dear Mr. Michaelson:

REGION 31

The charge that you filed in this case on November 04, 2015 has been docketed as case number 31-CA-163430. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310) 235-7805. If this Board agent is not available, you may contact Deputy Regional Attorney Anne J. White whose telephone number is (310) 235-7638.

<u>Right to Representation</u>: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, <u>www.nlrb.gov</u>, or at the Regional office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website www.nlrb.gov. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website www.nlrb.gov or from the Regional Office upon your request. *NLRB Form 4541, Investigative Procedures* offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin

Mori Rubin Regional Director

Angeles, California 90019

#### UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

#### FIRST AMENDED CHARGE AGAINST EMPLOYER INSTRUCTIONS:

DO NOT WRITE	IN THIS SPACE
Case	Date Filed
31-CA-163430	4/8/16

jeffmichaelson@hotmail.com

File an original of this charge with NLRB Regional Director in which the alleged unfair labor practice occurred or is occurring. 1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT a. Name of Employer b. Tel. No. West Side Center for Independent Living (310) 390-3611 ext 201 c. Cell No. d. Address (street, city, state ZIP code) e. Employer Representative f. Fax No. 12901 Venice Blvd., Los Angeles, CA Anastasia Bacigalupo, Esq. (310) 390-4906 90066 g. e-Mail Anastasia@wcil.org h. Dispute Location (City and State) Los Angeles, CA i. Type of Establishment (factory, nursing home, i. Principal Product or Service k. Number of workers at dispute location hotel) Non-profit disability rights organization disability rights advocacy I. The above-named employer has engaged in and is engaging unfair labor practices within the meaning of section 8(a), subsections (1), and (5) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. 2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) Within the past six months, the above-named Employer has given employees notices that they will no longer be allowed to park in designated park spaces without giving the Union notice or an opportunity bargain. Within the past six months, the above named Employer has eliminated two paid days off during the holiday period that were previously provided to employees without giving the Union notice and an opportunity to bargain. On about August 4, 2015, the Employer engaged in direct dealing by polling employees regarding changes to the parking lot. 3. Full name of party filing charge (if labor organization, give full name, including local name and number) Association of Professional Disabled Service Employees 4a. Address (street and number, city, state, and ZIP code) 4b. Tel. No. (858) 361-7533 4c. Cell No. 1375 Sierra Bonita Suite #1, Los Angeles, California 90019 (858) 361-7533 4d. Fax No. (323) 746-5512 4e. e-Mail jeffmichaelson@hotmail.com 5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization) 6. DECLARATION Tel. No. I declare that I have read the above charge and that the statements are true to the best of (858) 361-7533 my knowledge and belief. Office, if any, Cell No. Jeff Michaelson, Union president By: (858) 361-7533 (signature of representative or person making charge) Print Name and Title Fax No. (323) 746-5512 Date: e-Mail Address: 1375 Sierra Bonita Suite #1, Los 1/28/16

#### WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.





REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

April 13, 2016

Anastasia Bacigalupo, ESQ. West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-163430

Dear Ms. Bacigalupo:

Enclosed is a copy of the first amended charge that has been filed in this case.

<u>Investigator</u>: This charge is being investigated by Field Attorney CARLOS GONZALEZ whose telephone number is (310)235-7805. If the agent is not available, you may contact Supervisory Field Attorney JUAN C. OCHOA DIAZ whose telephone number is (310)235-7415.

<u>Presentation of Your Evidence</u>: As you know, we seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations in the first amended charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly.

**Procedures:** Your right to representation, the means of presenting evidence, and a description of our procedures, including how to submit documents, was described in the letter sent to you with the original charge in this matter. If you have any questions, please contact the Board agent.

Very truly yours,

Mori Rubin Regional Director

Mori Rubin

Enclosure: Copy of first amended charge





Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

April 13, 2016

Jeff Michaelson, President Association of Professional Disabled Service Employees 1375 S Sierra Bonita Ave Suite 1 Los Angeles, CA 90019-2505

11500 W Olympic Blvd Ste 600

Los Angeles, CA 90064-1753

Re: West Side Center for Independent Living

Case 31-CA-163430

Dear Mr. Michaelson:

REGION 31

We have docketed the first amended charge that you filed in this case.

<u>Investigator</u>: This charge is being investigated by Field Attorney CARLOS GONZALEZ whose telephone number is (310)235-7805. If the agent is not available, you may contact Supervisory Field Attorney JUAN C. OCHOA DIAZ whose telephone number is (310)235-7415.

<u>Presentation of Your Evidence</u>: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. If you have additional evidence regarding the allegations in the first amended charge and you have not yet scheduled a date and time for the Board agent to obtain that evidence, please contact the Board agent to arrange to present that evidence. If you fail to cooperate in promptly presenting your evidence, your charge may be dismissed.

<u>Procedures:</u> Your right to representation, the means of presenting evidence, and a description of our procedures, including how to submit documents, was described in the letter sent to you with the original charge in this matter. If you have any questions, please contact the Board agent.

Very truly yours,

Mori Rubin Regional Director

Mori Rubin



REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420

June 30, 2016

Jeff Michaelson, President Association of Professional Disabled Service Employees 1375 S Sierra Bonita Ave Suite 1 Los Angeles, CA 90019-2505

Re: West Side Center for Independent Living

Case 31-CA-163430

Dear Mr. Michaelson:

We have carefully investigated and considered your charge that West Side Center for Independent Living (Employer) has violated the National Labor Relations Act.

**Decision to Partially Dismiss:** Based on that investigation, I have decided to dismiss the portion of the charge alleging that the Employer violated Section 8(a)(5) of the Act by giving employees notices that they will no longer be allowed to park in designated parking spaces without giving the Union notice or an opportunity to bargain because there is insufficient evidence to establish a violation of the Act.

The remaining portions of the charge alleging that the Employer violated Section 8(a)(5) of the Act by eliminating two paid days off during the holiday period that were previously provided to employees and by engaging in direct dealing by polling employees regarding changes to the parking lot remain outstanding and will be subject to further proceedings.

Your Right to Appeal: You may appeal my decision to the General Counsel of the National Labor Relations Board, through the Office of Appeals. If you appeal, you may use the enclosed Appeal Form, which is also available at <a href="www.nlrb.gov">www.nlrb.gov</a>. However, you are encouraged to also submit a complete statement of the facts and reasons why you believe my decision was incorrect.

Means of Filing: An appeal may be filed electronically, by mail, by delivery service, or hand-delivered. Filing an appeal electronically is preferred but not required. The appeal MAY NOT be filed by fax or email. To file an appeal electronically, go to the Agency's website at <a href="https://www.nlrb.gov">www.nlrb.gov</a>, click on E-File Documents, enter the NLRB Case Number, and follow the detailed instructions. To file an appeal by mail or delivery service, address the appeal to the General Counsel at the National Labor Relations Board, Attn: Office of Appeals, 1015 Half Street SE, Washington, DC 20570-0001. Unless filed electronically, a copy of the appeal should also be sent to me.

Appeal Due Date: The appeal is due on July 14, 2016. If the appeal is filed electronically, the transmission of the entire document through the Agency's website must be completed no later than 11:59 p.m. Eastern Time on the due date. If filing by mail or by

delivery service an appeal will be found to be timely filed if it is postmarked or given to a delivery service no later than July 13, 2016. If an appeal is postmarked or given to a delivery service on the due date, it will be rejected as untimely. If hand delivered, an appeal must be received by the General Counsel in Washington D.C. by 5:00 p.m. Eastern Time on the appeal due date. If an appeal is not submitted in accordance with this paragraph, it will be rejected.

Extension of Time to File Appeal: The General Counsel may allow additional time to file the appeal if the Charging Party provides a good reason for doing so and the request for an extension of time is received on or before July 14, 2016. The request may be filed electronically through the *E-File Documents* link on our website <a href="www.nlrb.gov">www.nlrb.gov</a>, by fax to (202)273-4283, by mail, or by delivery service. The General Counsel will not consider any request for an extension of time to file an appeal received after July 14, 2016, even if it is postmarked or given to the delivery service before the due date. Unless filed electronically, a copy of the extension of time should also be sent to me.

Confidentiality: We will not honor any claim of confidentiality or privilege or any limitations on our use of appeal statements or supporting evidence beyond those prescribed by the Federal Records Act and the Freedom of Information Act (FOIA). Thus, we may disclose an appeal statement to a party upon request during the processing of the appeal. If the appeal is successful, any statement or material submitted with the appeal may be introduced as evidence at a hearing before an administrative law judge. Because the Federal Records Act requires us to keep copies of case handling documents for some years after a case closes, we may be required by the FOIA to disclose those documents absent an applicable exemption such as those that protect confidential sources, commercial/financial information, or personal privacy interests.

very truly yours,

Acting Regional Director

Enclosure

cc: Anastasia Bacigalupo, ESQ.

West Side Center for Independent Living

12901 Venice Blvd

Los Angeles, CA 90066-3509

Form NLRB - 501 (2-08)

#### UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

#### CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

Angeles, California 90019

DO NOT WRITE IN THIS SPACE Case Date Filed 12/16/2015 31-CA-166232

	Director in which the alleged unfair labor practice	
	EMPLOYER AGAINST WHOM CHARGE IS BRO	
a. Name of Employer		b. Tel. No.
West Side Center for Independent Living		(310) 390-3611 ext 201
		c. Cell No.
d. Address (street, city, state ZIP code)	e. Employer Representative	f. Fax No.
12901 Venice Blvd., Los Angeles, CA	Anastasia Bacigalupo, Esq.	(310) 390-4906
90066		g. e-Mail
		Anastasia@wcil.org
		h. Dispute Location (City and State)
		Los Angeles, CA
i. Type of Establishment (factory, nursing home,	j. Principal Product or Service	k. Number of workers at dispute location
hotel)	j. Timespart roduct or dervice	1 16
Non-profit disability rights organization	disability rights advocacy	10
		1
	d is engaging unfair labor practices within the mean	
the inational Labor Relations Act, and these unfair	labor practices are practices affecting commerce nerce within the meaning of the Act and the Postal	Peorganization Act
	se statement of the facts constituting the alleged u	
2. Dasis of the Charge (set forth a clear and conci.	se statement of the facts constituting the alleged of	maii rabor practices)
Within the nect civ menths, the chave name	d Employer has engaged in direct dealing by	(1) making a job offer to convert an
	nanent status, (2) making an offer to change	
	esignation of employee restrooms, and (4)ne	gotiating with an employee concerning
salary.		
<b>—</b> '		
2. Full page of party filing obayes (if takey arganize	ation, give full name, including local name and nun	
3. Full name of party ning charge ( <i>it labor organiza</i>		
		nber)
Association of Professional Disable		nber)
		nber)
Association of Professional Disable	ed Service Employees	4b. Tel. No.
	ed Service Employees	4b. Tel. No.
Association of Professional Disable  4a. Address (street and number, city, state, and ZI	ed Service Employees	4b. Tel. No. (858) 361-7533
Association of Professional Disable	ed Service Employees	4b. Tel. No. (858) 361-7533
Association of Professional Disable  4a. Address (street and number, city, state, and ZI	ed Service Employees	4b. Tel. No. (858) 361-7533 *4c. Cell No. (858) 361-7533
Association of Professional Disable  4a. Address (street and number, city, state, and ZI	ed Service Employees	4b. Tel. No. (858) 361-7533 *4c. Cell No. (858) 361-7533 4d. Fax No.
Association of Professional Disable  4a. Address (street and number, city, state, and ZI	ed Service Employees	4b. Tel. No. (858) 361-7533 *4c. Cell No. (858) 361-7533 4d. Fax No. (323) 746-5512
Association of Professional Disable  4a. Address (street and number, city, state, and ZI	ed Service Employees	4b. Tel. No. (858) 361-7533 *4c. Cell No. (858) 361-7533 4d. Fax No. (323) 746-5512 4e. e-Mail
Association of Professional Disable  4a. Address (street and number, city, state, and Zi  1375 Sierra Bonita Suite #1, Los Angeles,	P code) California 90019	4b. Tel. No. (858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com
Association of Professional Disable  4a. Address (street and number, city, state, and ZI	P code) California 90019	4b. Tel. No. (858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com
Association of Professional Disable  4a. Address (street and number, city, state, and Zi  1375 Sierra Bonita Suite #1, Los Angeles,	P code) California 90019	4b. Tel. No. (858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com
Association of Professional Disable  4a. Address (street and number, city, state, and Zi  1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organical states.	P code) California 90019	4b. Tel. No. (858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com
Association of Professional Disable  4a. Address (street and number, city, state, and Zi  1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)	P code) California 90019	4b. Tel. No. (858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com  (to be filled in when charge is filed by a labor
Association of Professional Disable  4a. Address (street and number, city, state, and Zi  1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)	ed Service Employees P code) California 90019 nization of which it is an affiliate or constituent unit	4b. Tel. No. (858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com  (to be filled in when charge is filed by a labor  Tel. No.
Association of Professional Disable  4a. Address (street and number, city, state, and Zi  1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)  6. DECLARATION 1 declare that I have read the above charge a	P code) California 90019	4b. Tel. No. (858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com  (to be filled in when charge is filed by a labor
Association of Professional Disable  4a. Address (street and number, city, state, and Zi  1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)	ed Service Employees P code) California 90019 nization of which it is an affiliate or constituent unit	4b. Tel. No. (858) 361-7533  *4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com  (to be filled in when charge is filed by a labor  Tel. No. (858) 361-7533
Association of Professional Disable  4a. Address (street and number, city, state, and ZI  1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)  6. DECLARATION 1 declare that I have read the above charge a my knowledge and belief.	ed Service Employees  P code)  California 90019  nization of which it is an affiliate or constituent unit  nd that the statements are true to the best of	4b. Tel. No. (858) 361-7533  *4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com  (to be filled in when charge is filed by a labor  Tel. No. (858) 361-7533  Office, if any, Cell No.
Association of Professional Disable  4a. Address (street and number, city, state, and Zi  1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)  6. DECLARATION 1 declare that I have read the above charge a	ed Service Employees P code) California 90019 nization of which it is an affiliate or constituent unit	4b. Tel. No. (858) 361-7533  *4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com  (to be filled in when charge is filed by a labor  Tel. No. (858) 361-7533
Association of Professional Disable  4a. Address (street and number, city, state, and Zi  1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)  6. DECLARATION 1 declare that I have read the above charge a my knowledge and belief.  By:	ed Service Employees  P code) California 90019  nization of which it is an affiliate or constituent unit and that the statements are true to the best of  Jeff Michaelson	4b. Tel. No. (858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffinichaelson@hotmail.com  (to be filled in when charge is filed by a labor  Tel. No. (858) 361-7533  Office, if any, Cell No. (858) 361-7533
Association of Professional Disable  4a. Address (street and number, city, state, and ZI  1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)  6. DECLARATION 1 declare that I have read the above charge a my knowledge and belief.	ed Service Employees  P code) California 90019  nization of which it is an affiliate or constituent unit and that the statements are true to the best of  Jeff Michaelson	4b. Tel. No. (858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffinichaelson@hotmail.com  (to be filled in when charge is filed by a labor  Tel. No. (858) 361-7533  Office, if any, Cell No. (858) 361-7533
Association of Professional Disable  4a. Address (street and number, city, state, and Zi  1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)  6. DECLARATION 1 declare that I have read the above charge a my knowledge and belief.  By:  (signature of representative or person making city)	nization of which it is an affiliate or constituent unit  Ind that the statements are true to the best of  Jeff Michaelson  Print Name and Title  APD SE	4b. Tel. No. (858) 361-7533  *4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffinichaelson@hotmail.com  (to be filled in when charge is filed by a labor  Tel. No. (858) 361-7533  Office, if any, Cell No. (858) 361-7533  Fax No. (323) 746-5512
Association of Professional Disable  4a. Address (street and number, city, state, and Zi  1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)  6. DECLARATION 1 declare that I have read the above charge a my knowledge and belief.  By:	ed Service Employees  P code) California 90019  nization of which it is an affiliate or constituent unit and that the statements are true to the best of  Jeff Michaelson	4b. Tel. No. (858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffinichaelson@hotmail.com  (to be filled in when charge is filed by a labor  Tel. No. (858) 361-7533  Office, if any, Cell No. (858) 361-7533

#### WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seg. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.



REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420

Download NLRB Mobile App

December 17, 2015

Anastasia Bacigalupo, Esq. West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-166232

Dear Ms. Bacigalupo:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310) 235-7805. If this Board agent is not available, you may contact Supervisory Field Attorney Juan C. Ochoa Diaz whose telephone number is (310) 235-7415.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

Presentation of Your Evidence: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly. Due to the nature of the allegations in the enclosed unfair labor practice charge, we have identified this case as one in which injunctive relief pursuant to Section 10(j) of the Act may be appropriate. Therefore, in addition to investigating the merits of the unfair labor practice allegations, the Board agent will also inquire into those factors relevant to making a determination as to whether or not 10(j) injunctive relief is appropriate in this case. Accordingly, please include your position on the appropriateness of Section 10(j) relief when you submit your evidence relevant to the investigation.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor any request to place limitations on our use of position statements or evidence beyond those prescribed by the Freedom of Information Act and the Federal Records Act. Thus, we will not honor any claim of confidentiality except as provided by Exemption 4 of FOIA, 5 U.S.C. Sec. 552(b)(4), and any material you submit may be introduced as evidence at any hearing before an administrative law judge. We are also required by the Federal Records Act to keep copies of documents gathered in our investigation for some years after a case closes. Further, the Freedom of Information Act may require that we disclose such records in closed cases upon request, unless there is an applicable exemption. Examples of those exemptions are those that protect confidential financial information or personal privacy interests.

**Procedures:** We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website, www.nlrb.gov. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, www.nlrb.gov or from an NLRB office upon your request. NLRB Form 4541 offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin Regional Director

Mori Rubin

#### Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire





Download NLRB Mobile App

REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753

December 17, 2015

Fax: (310)235-7420

Agency Website: www.nlrb.gov

Telephone: (310)235-7351

Jeff Michaelson, President Association of Professional Disabled Service Employees 1375 S Sierra Bonita Ave, Suite 1 Los Angeles, CA 90019-2505

Re: West Side Center for Independent Living

Case 31-CA-166232

Dear Mr. Michaelson:

The charge that you filed in this case on December 16, 2015 has been docketed as case number 31-CA-166232. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310) 235-7805. If this Board agent is not available, you may contact Supervisory Field Attorney Juan C. Ochoa Diaz whose telephone number is (310) 235-7415.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or at the Regional office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

**Presentation of Your Evidence:** As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website <a href="www.nlrb.gov">www.nlrb.gov</a> or from the Regional Office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin

Mori Rubin Regional Director



REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351

Fax: (310)235-7420

May 18, 2016

Anastasia Bacigalupo West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-166232

Dear Ms. Bacigalupo:

This is to advise that I have approved the withdrawal of the portions of the charge alleging that West Side Center for Independent Living (Employer) violated Section 8(a)(1) and (5) of the Act by: directly dealing with an employee by offering to convert the employee's position from temporary to permanent status; and directly dealing with an employee concerning salary.

The remaining portions of the charge alleging that the Employer violated Section 8(a)(1) and (5) of the Act by directly dealing with an employee concerning changes to the employee's job duties and responsibilities, and by directly dealing with employees regarding changes to the designation of employee restrooms remain outstanding and will be subject to further proceedings.

Very truly yours,

Mori Rubin Regional Director

cc: Jeff Michaelson, President
Association of Professional Disabled Service Employees
1375 S Sierra Bonita Ave., Suite 1
Los Angeles, CA 90019-2505

Form NLRB - 501 (2-08)

## UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
31-CA-167382	1/8/16

INSTRUCTIONS:

	EMPLOYED A CANDOT WILLOW OLLA DOE IS DOOL	ccurred or is occurring.
a. Name of Employer	EMPLOYER AGAINST WHOM CHARGE IS BROU	
		b. Tel. No.
West Side Center for Independent Living		(310) 390-3611 ext 201
d Address (street situ state 71D ands)	- Employer Degrees stating	c. Cell No.
d. Address (street, city, state ZIP code)	e. Employer Representative	f. Fax No.
12901 Venice Blvd., Los Angeles, CA	Anastasia Bacigalupo, Esq.	(310) 390-4906
90066		g. e-Mail
		Anastasia@wcil.org
		h. Dispute Location (City and State)
		Los Angeles, CA
i. Type of Establishment (factory, nursing home,	j. Principal Product or Service	k. Number of workers at dispute location
hotel)	4. 19. 11.	16
Non-profit disability rights organization	disability rights advocacy	
I. The above-named employer has engaged in and		
the National Labor Relations Act, and these unfair	labor practices are practices affecting commerce w	ithin the meaning of the Act, or these unfair
labor practices are unfair practices affecting comm	erce within the meaning of the Act and the Postal F	Reorganization Act.
2. Basis of the Charge (set forth a clear and concis	e statement of the facts constituting the alleged un	fair labor practices)
W.4. 41 4 1 1	110 1 1 2 14	. 111 1 6 4
•	e-named Employer has continued to e	ngage in overall bad faith
bargaining during first contract negot	iations with the Union.	
g g		
3. Full name of party filing charge (if labor organiza	tion, give full name, including local name and numb	per)
Association of Professional Disable		
The state of the s	a service Employees	
4a. Address (street and number, city, state, and ZII	2 rodo)	4b. Tel. No.
4a. Address (street and number, city, state, and Zii	code)	
	•	(858) 361-7533
1375 Sierra Bonita Suite #1, Los Angeles,	•	(858) 361-7533 4c. Cell No.
1375 Sierra Bonita Suite #1, Los Angeles,	•	(858) 361-7533 4c. Cell No. (858) 361-7533
1375 Sierra Bonita Suite #1, Los Angeles,	•	(858) 361-7533 4c. Cell No. (858) 361-7533 4d. Fax No.
1375 Sierra Bonita Suite #1, Los Angeles,	•	(858) 361-7533 4c. Cell No. (858) 361-7533 4d. Fax No. (323) 746-5512
1375 Sierra Bonita Suite #1, Los Angeles,	•	(858) 361-7533 4c. Cell No. (858) 361-7533 4d. Fax No. (323) 746-5512 4e. e-Mail
	California 90019	(858) 361-7533 4c. Cell No. (858) 361-7533 4d. Fax No. (323) 746-5512 4e. e-Mail jeffmichaelson@hotmail.com
5. Full name of national or international labor organ	California 90019	(858) 361-7533 4c. Cell No. (858) 361-7533 4d. Fax No. (323) 746-5512 4e. e-Mail jeffmichaelson@hotmail.com
	California 90019	(858) 361-7533 4c. Cell No. (858) 361-7533 4d. Fax No. (323) 746-5512 4e. e-Mail jeffmichaelson@hotmail.com
5. Full name of national or international labor organ	California 90019	(858) 361-7533 4c. Cell No. (858) 361-7533 4d. Fax No. (323) 746-5512 4e. e-Mail jeffmichaelson@hotmail.com
Full name of national or international labor organization)	California 90019	(858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com  to be filled in when charge is filed by a labor
Full name of national or international labor organization)      DECLARATION	Catifornia 90019 ization of which it is an affiliate or constituent unit (	(858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com to be filled in when charge is filed by a labor  Tel. No.
5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge ar	Catifornia 90019 ization of which it is an affiliate or constituent unit (	(858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com  to be filled in when charge is filed by a labor
5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge army knowledge and belief.	Catifornia 90019 ization of which it is an affiliate or constituent unit (	(858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com to be filled in when charge is filed by a labor  Tel. No. (858) 361-7533
5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge army knowledge and belief.	Catifornia 90019  Dization of which it is an affiliate or constituent unit (  and that the statements are true to the best of	(858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com to be filled in when charge is filed by a labor  Tel. No. (858) 361-7533  Office, if any, Cell No.
5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge army knowledge and belief.	Catifornia 90019 ization of which it is an affiliate or constituent unit (	(858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com to be filled in when charge is filed by a labor  Tel. No. (858) 361-7533
5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge army knowledge and belief.  By:	California 90019  Dization of which it is an affiliate or constituent unit (  and that the statements are true to the best of  Jeff Michaelson	(858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com to be filled in when charge is filed by a labor  Tel. No. (858) 361-7533  Office, if any, Cell No.
5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge army knowledge and belief.	California 90019  Dization of which it is an affiliate or constituent unit (  Ind that the statements are true to the best of  Jeff Michaelson  Print Name and Title	(858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com to be filled in when charge is filed by a labor  Tel. No. (858) 361-7533  Office, if any, Cell No. (858) 361-7533  Fax No.
5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge army knowledge and belief.  By:  (signature of representative or person making charge charge arms)	California 90019  Dization of which it is an affiliate or constituent unit (  Ind that the statements are true to the best of  Jeff Michaelson  Print Name and Title	(858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com to be filled in when charge is filed by a labor  Tel. No. (858) 361-7533  Office, if any, Cell No. (858) 361-7533
5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge army knowledge and belief.  By:	California 90019  Dization of which it is an affiliate or constituent unit (  and that the statements are true to the best of  Jeff Michaelson	(858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com to be filled in when charge is filed by a labor  Tel. No. (858) 361-7533  Office, if any, Cell No. (858) 361-7533  Fax No. (323) 746-5512

### WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.





REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

January 11, 2016

Anastasia Bacigalupo, ESQ. West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-167382

Dear Ms. Bacigalupo:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310)235-7805. If this Board agent is not available, you may contact Field Attorney Jean Libby whose telephone number is (213)894-5229.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

Presentation of Your Evidence: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly. Due to the nature of the allegations in the enclosed unfair labor practice charge, we have identified this case as one in which injunctive relief pursuant to Section 10(j) of the Act may be appropriate. Therefore, in addition to investigating the merits of the unfair labor practice allegations, the

Board agent will also inquire into those factors relevant to making a determination as to whether or not 10(j) injunctive relief is appropriate in this case. Accordingly, please include your position on the appropriateness of Section 10(j) relief when you submit your evidence relevant to the investigation.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor any request to place limitations on our use of position statements or evidence beyond those prescribed by the Freedom of Information Act and the Federal Records Act. Thus, we will not honor any claim of confidentiality except as provided by Exemption 4 of FOIA, 5 U.S.C. Sec. 552(b)(4), and any material you submit may be introduced as evidence at any hearing before an administrative law judge. We are also required by the Federal Records Act to keep copies of documents gathered in our investigation for some years after a case closes. Further, the Freedom of Information Act may require that we disclose such records in closed cases upon request, unless there is an applicable exemption. Examples of those exemptions are those that protect confidential financial information or personal privacy interests.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website, <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a> or from an NLRB office upon your request. NLRB Form 4541 offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Mori Rubin

Very truly yours,

Mori Rubin Regional Director

#### Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire





Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

January 11, 2016

Jeff Michaelson, President Association of Professional Disabled Service Employees 1375 S Sierra Bonita Ave Suite 1 Los Angeles, CA 90019-2505

11500 W Olympic Blvd Ste 600

Los Angeles, CA 90064-1753

Re: West Side Center for Independent Living

Case 31-CA-167382

Dear Mr. Michaelson:

REGION 31

The charge that you filed in this case on January 08, 2016 has been docketed as case number 31-CA-167382. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney CARLOS GONZALEZ whose telephone number is (310)235-7805. If this Board agent is not available, you may contact Field Attorney JEAN LIBBY whose telephone number is (213)894-5229.

**Right to Representation:** You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or at the Regional office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you

fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website <a href="www.nlrb.gov">www.nlrb.gov</a> or from the Regional Office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin

Mori Rubin Regional Director



REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420

March 29, 2016

Anastasia Bacigalupo, Esq. West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-167382

Dear Ms. Bacigalupo:

This is to advise you that I have approved the withdrawal of the charge in the above matter.

Very truly yours,

Brian Gee

Acting Regional Director

cc: Jeff Michaelson, President

Association of Professional Disabled

Service Employees

1375 S Sierra Bonita Avenue, Suite 1

Los Angeles, CA 90019-2505

Form NLRB - 501 (2-08)

# UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE

Case Date Filed

31-CA-169080 2/3/2016

		<del></del>		
File an original of this charge with NLRB Regional	Director in which the alleged unfair labor practice oc	curred or is occurring.		
	EMPLOYER AGAINST WHOM CHARGE IS BROUG			
a. Name of Employer		b. Tel. No.		
West Side Center for Independent Living		(310) 390-3611 ext 201		
		c. Cell No.		
d. Address (street, city, state ZIP code)	e. Employer Representative	f. Fax No.		
12901 Venice Blvd., Los Angeles, CA	Anastasia Bacigalupo, Esq.	(310) 390-4906		
90066		g. e-Mail		
		Anastasia@wcil.org		
		h. Dispute Location (City and State)		
		Los Angeles, CA		
i. Type of Establishment (factory, nursing home,	j. Principal Product or Service	k. Number of workers at dispute location		
hotel)	j. i molpari roductor delvice	16		
Non-profit disability rights organization	disability rights advocacy	10		
		a of sestion 9(a) subsections (4) and (5) of		
	d is engaging unfair labor practices within the meaning			
	labor practices are practices affecting commerce with nerce within the meaning of the Act and the Postal Ro			
	se statement of the facts constituting the alleged unfa			
2. dasis of the Charge (set forth a clear and concis	se statement of the facts constituting the alleged unit	ali laboi practices)		
Within the most six mouths, the -1	a named Employer has well-to-all-	alamantad ita dagigian ta nafrain		
_	e-named Employer has unilaterally imp			
from hiring an employee to fill the po	osition of housing specialist and instead	d assigned housing specialist		
	gaining with the Union to an overall in			
dures to an service start without bary	gammig with the Omon to an overall in	ipasse.		
3. Full name of party filing charge (if labor organize	ation, give full name, including local name and numb	er)		
		<del>0</del> 1]		
Association of Professional Disable	Association of Professional Disabled Service Employees			
	T			
	r /			
4a. Address (street and number, city, state, and 71		4b Tel No.		
4a. Address (street and number, city, state, and ZI		4b. Tel. No. (858) 361-7533		
	P code)	(858) 361-7533		
4a. Address (street and number, city, state, and ZI 1375 Sierra Bonita Suite #1, Los Angeles,	P code)	(858) 361-7533 4c. Cell No.		
	P code)	(858) 361-7533 4c. Cell No. (858) 361-7533		
	P code)	(858) 361-7533 4c. Cell No. (858) 361-7533 4d. Fax No.		
	P code)	(858) 361-7533 4c. Cell No. (858) 361-7533 4d. Fax No. (323) 746-5512		
	P code)	(858) 361-7533 4c. Cell No. (858) 361-7533 4d. Fax No. (323) 746-5512 4e. e-Mail		
1375 Sierra Bonita Suite #1, Los Angeles,	P code) California 90019	(858) 361-7533 4c. Cell No. (858) 361-7533 4d. Fax No. (323) 746-5512 4e. e-Mail jeffmichaelson@hotmail.com		
1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organ	P code)	(858) 361-7533 4c. Cell No. (858) 361-7533 4d. Fax No. (323) 746-5512 4e. e-Mail jeffmichaelson@hotmail.com		
1375 Sierra Bonita Suite #1, Los Angeles,	P code) California 90019	(858) 361-7533 4c. Cell No. (858) 361-7533 4d. Fax No. (323) 746-5512 4e. e-Mail jeffmichaelson@hotmail.com		
1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organ	P code) California 90019	(858) 361-7533 4c. Cell No. (858) 361-7533 4d. Fax No. (323) 746-5512 4e. e-Mail jeffmichaelson@hotmail.com		
1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)	P code) California 90019	(858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com o be filled in when charge is filed by a labor		
1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)  6. DECLARATION	P code)  California 90019  nization of which it is an affiliate or constituent unit (to	(858) 361-7533 4c. Cell No. (858) 361-7533 4d. Fax No. (323) 746-5512 4e. e-Mail jeffmichaelson@hotmail.com o be filled in when charge is filed by a labor  Tel. No.		
1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge a	P code) California 90019	(858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com o be filled in when charge is filed by a labor		
1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)  6. DECLARATION	P code)  California 90019  nization of which it is an affiliate or constituent unit (to	(858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com o be filled in when charge is filed by a labor  Tel. No. (858) 361-7533		
1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge a my knowledge and belief.	P code)  California 90019  nization of which it is an affiliate or constituent unit (to an affiliate or constituent unit (	(858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com o be filled in when charge is filed by a labor  Tel. No. (858) 361-7533  Office, if any, Cell No.		
1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge a	P code)  California 90019  nization of which it is an affiliate or constituent unit (to	(858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com o be filled in when charge is filed by a labor  Tel. No. (858) 361-7533		
1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge a my knowledge and belter.  By:	California 90019  nization of which it is an affiliate or constituent unit (to and that the statements are true to the best of Jeff Michaelson, Union president	(858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com o be filled in when charge is filed by a labor  Tel. No. (858) 361-7533  Office, if any, Cell No. (858) 361-7533		
1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge a my knowledge and belief.	California 90019  nization of which it is an affiliate or constituent unit (to and that the statements are true to the best of Jeff Michaelson, Union president	(858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com o be filled in when charge is filed by a labor  Tel. No. (858) 361-7533  Office, if any, Cell No. (858) 361-7533  Fax No.		
1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge a my knowledge and helief.  By:  (signature of representative or person making classification)	California 90019  nization of which it is an affiliate or constituent unit (to an aff	(858) 361-7533 4c. Cell No. (858) 361-7533 4d. Fax No. (323) 746-5512 4e. e-Mail jeffmichaelson@hotmail.com o be filled in when charge is filed by a labor  Tel. No. (858) 361-7533  Office, if any, Cell No. (858) 361-7533  Fax No. (323) 746-5512		
1375 Sierra Bonita Suite #1, Los Angeles,  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge a my knowledge and belter.  By:	California 90019  nization of which it is an affiliate or constituent unit (to and that the statements are true to the best of Jeff Michaelson, Union president	(858) 361-7533  4c. Cell No. (858) 361-7533  4d. Fax No. (323) 746-5512  4e. e-Mail jeffmichaelson@hotmail.com o be filled in when charge is filed by a labor  Tel. No. (858) 361-7533  Office, if any, Cell No. (858) 361-7533  Fax No.		

### WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.





REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

February 4, 2016

Jeff Michaelson, President Association of Professional Disabled Service Employees 1375 S Sierra Bonita Ave., Suite 1 Los Angeles, CA 90019-2505

Re: West Side Center for Independent Living

Case 31-CA-169080

Dear Mr. Michaelson:

The charge that you filed in this case on February 03, 2016 has been docketed as case number 31-CA-169080. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310)235-7805. If this Board agent is not available, you may contact Supervisory Field Attorney Juan C. Ochoa Diaz whose telephone number is (310)235-7415.

**Right to Representation:** You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or at the Regional office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you

fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website <a href="www.nlrb.gov">www.nlrb.gov</a> or from the Regional Office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin

Mori Rubin Regional Director





REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

February 4, 2016

Anastasia Bacigalupo, Esq. West Side Center for Independent Living 12901 Venice Blvd. Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-169080

Dear Ms. Bacigalupo:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310)235-7805. If this Board agent is not available, you may contact Supervisory Field Attorney Juan C. Ochoa Diaz whose telephone number is (310)235-7415.

<u>Right to Representation</u>: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, <u>www.nlrb.gov</u>, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent.

Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor any request to place limitations on our use of position statements or evidence beyond those prescribed by the Freedom of Information Act and the Federal Records Act. Thus, we will not honor any claim of confidentiality except as provided by Exemption 4 of FOIA, 5 U.S.C. Sec. 552(b)(4), and any material you submit may be introduced as evidence at any hearing before an administrative law judge. We are also required by the Federal Records Act to keep copies of documents gathered in our investigation for some years after a case closes. Further, the Freedom of Information Act may require that we disclose such records in closed cases upon request, unless there is an applicable exemption. Examples of those exemptions are those that protect confidential financial information or personal privacy interests.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website, <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a> or from an NLRB office upon your request. NLRB Form 4541 offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin

Mori Rubin Regional Director

#### Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire

Form NLRB - 501 (2-08)

# UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE

Case Date Filed

31-CA-169899 2/17/2016

File an original of this charge with NLRB Regional	Director in which the alleged unfair labor practice o	occurred or is occurring.
1. [	EMPLOYER AGAINST WHOM CHARGE IS BROI	JGHT
a. Name of Employer		b. Tel. No.
West Side Center for Independent Living		(310) 390-3611 ext 201
		c. Cell No.
d. Address (street, city, state ZIP code)	e. Employer Representative	f, Fax No.
12901 Venice Blvd., Los Angeles, CA	Anastasia Bacigalupo, Esq.	(310) 390-4906
90066		g. e-Mail
		Anastasia@wcil.org
		h. Dispute Location (City and State)
		Los Angeles, CA
i. Type of Establishment (factory, nursing home,	j. Principal Product or Service	k. Number of workers at dispute location
hotel)	disability sisks advances	16
Non-profit disability rights organization	disability rights advocacy	(1) (2) (4)
The above-named employer has engaged in and     (5) of the National Labor Relations Act, and these unfair labor practices are unfair practices affecting	unfair labor practices are practices affecting comm	erce within the meaning of the Act, or these
Basis of the Charge (set forth a clear and concise)		
• .		
On about (b) (6), (b) (7)(C), 2016, the above	ve-named Employer laid off (b) (6), (b	(7)(C) from $(0, (6), (6), (6), (7)(C)$
	in retaliation for the Union and Board	l activities and the Employer
failed to bargain with the Union prior	to the implementation of the decision	n to lay off.
3. Full name of party filing charge (if labor organiza	tion also full name, including local name and num	phod
		(Der)
Association of Professional Disable	d Service Employees	
4a. Address (street and number, city, state, and ZII	P code)	4b. Tel. No.
		(b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)		4c. Cell No.
(2) (2), (2) (.) (2)		(b) (6), (b) (7)(C)
		4d, Fax No (b) (6), (b) (7)(C)
		4e. e-Mail
		(b) (6), (b) (7)(C)
5. Full name of national or international labor organ	nization of which it is an affiliate or constituent unit	(to be filled in when charge is filed by a labor
organization)		
6. DECLARATION		Tel No
I declare that I have re (6) (6) (6) (7)(6) e charge at	nd that the statements are true to the best of	(b) (6), (b) (7)(C)
my knowledge and bel		
	(b) (6) (b) (7)(C)	Office, if any, Cell No.
<sub>ву</sub> (b) (6), (b) (7)(С	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)
(b) (6), (b) (7)(c) ure of representative or person making co	narge) Print Name and Title	Fax No.
	- 2112111	(b) (6), (b) (7)(C)
$_{(b)(6),(b)(7)(c)}^{\text{Address:}}(b)(6),(6),(b)(7)(C)$	Date: 0~/17/16	(b) (6), (b) (7)(C)
		(b) (b) (1)(b)
WILLELL GALSE STATEMENTS ON THIS CHAP	DOE CAN BE BUNISHED BY FINE AND IMPRIS	ONMENT (IIS CODE TITLE 18 SECTION 1801)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.





REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

February 18, 2016

(b) (6), (b) (7)(C)
Association of Professional Disabled Service Employees
(b) (6), (b) (7)(C)

Re: West Side Center for Independent Living

Case 31-CA-169899

#### Dear (b) (6), (b) (7)(C):

The charge that you filed in this case on February 17, 2016 has been docketed as case number 31-CA-169899. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Simone Pang Gancayco whose telephone number is (310)235-6169. If this Board agent is not available, you may contact Supervisory Field Attorney Juan C. Ochoa Diaz whose telephone number is (310)235-7415.

**Right to Representation:** You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or at the Regional office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you

fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website <a href="www.nlrb.gov">www.nlrb.gov</a> or from the Regional Office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin

Mori Rubin Regional Director





REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

February 18, 2016

Anastasia Bacigalupo, Esq. West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-169899

Dear Ms. Bacigalupo:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Simone Pang Gancayco whose telephone number is (310)235-6169. If this Board agent is not available, you may contact Supervisory Field Attorney Juan C. Ochoa Diaz whose telephone number is (310)235-7415.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor any request to place limitations on our use of position statements or evidence beyond those prescribed by the Freedom of Information Act and the Federal Records Act. Thus, we will not honor any claim of confidentiality except as provided by Exemption 4 of FOIA, 5 U.S.C. Sec. 552(b)(4), and any material you submit may be introduced as evidence at any hearing before an administrative law judge. We are also required by the Federal Records Act to keep copies of documents gathered in our investigation for some years after a case closes. Further, the Freedom of Information Act may require that we disclose such records in closed cases upon request, unless there is an applicable exemption. Examples of those exemptions are those that protect confidential financial information or personal privacy interests.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website, <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a> or from an NLRB office upon your request. NLRB Form 4541 offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin Regional Director

Mori Rubin

Enclosures:

1. Copy of Charge

2. Commerce Questionnaire



REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753

Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420

March 29, 2016

Anastasia Bacigalupo, Esq. West Side Center for Independent Living 12901 Venice Blvd. Los Angeles, CA 90066-3509

Re:

West Side Center for Independent Living

Case 31-CA-169899

Dear Ms. Bacigalupo:

This is to advise you that I have approved the withdrawal of the charge in the above matter.

Very troly yours,

Brian Gee

Acting Regional Director

cc:

Association of Professional Disabled

Service Employees

Form NLRB - 501 (2-08)

### UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

#### **CHARGE AGAINST EMPLOYER**

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE

Case Date Filed

31-CA-170522 2/25/2016

File an original of this charge with NLRB Regional	Director in which the alleged untair labor practice of	curred or is occurring.
<u> </u>	EMPLOYER AGAINST WHOM CHARGE IS BROUG	GHT
a. Name of Employer		b. Tel. No.
West Side Center for Independent Living		(310) 390-3611 ext 201
		c. Cell No.
d. Address (street, city, state ZIP code)	e. Employer Representative	f. Fax No.
		(310) 390-4906
12901 Venice Blvd., Los Angeles, CA	Anastasia Bacigalupo, Esq.	
90066		g. e-Mail
		Anastasia@wcil.org
		h. Dispute Location (City and State)
		Los Angeles, CA
i. Type of Establishment (factory, nursing home,	j. Principal Product or Service	k. Number of workers at dispute location
hotel)	j. i illicipari roduct di Gervice	16
Non-profit disability rights organization	disability rights advocacy	10
I. The above-named employer has engaged in and	is engaging unfair labor practices within the meaning	ng of section 8(a), subsections (1), and (3) of
	labor practices are practices affecting commerce wi	
labor practices are unfair practices affecting comm	erce within the meaning of the Act and the Postal R	eorganization Act.
2. Basis of the Charge (set forth a clear and concis	se statement of the facts constituting the alleged unf	air labor practices)
(1) (0) (1) (7)(0)		(0) (1) (7)(0)
On $(0)$ $(0)$ , $(0)$ $(7)$ $(0)$ 2016, the above-nar	ned Employer terminated employee (b	) (6), (b) (7)(C) in retaliation for
Union and protected concerted ac		
Official and protected concerted ac	ativities.	
3. Full name of party filing charge (if labor organiza	ation, give full name, including local name and numb	er)
Association of Professional Disable		,
Association of Floressional Disable	ed Service Employees	
4a. Address (street and number, city, state, and ZI	P code)	4b. Tel. No.
territoria (en est and traines), etting and a	. 4435,	(858) 361-7533
		4c. Cell No.
1375 Sierra Bonita Suite #1, Los Angeles,	California 90019	
-		(858) 361-7533
		4d. Fax No.
		(323) 746-5512
		4e. e-Mail
		jeffmichaelson@hotmail.com
5 Full name of national or international labor area	signation of which it is an official or constituent will the	
organization)	nization of which it is an affiliate or constituent unit (t	o be filled in when charge is filed by a labor
Organization)		
6. DECLARATION		Tel. No.
	nd that the statements are true to the best of	
my knowledge and belief.	id that the statements are thus to the best of	(858) 361-7533
,		
		Office if any Cell No
By:	Jeff Michaelson, Union precident	Office, if any, Cell No.
By:	Jeff Michaelson, Union president	Office, if any, Cell No. (858) 361-7533
		(858) 361-7533
By: (signature of representative or person making cl	narge) Print Name and Title	(858) 361-7533 Fax No.
(signature of representative or person making cl	narge) Print Name and Title	(858) 361-7533 Fax No. (323) 746-5512
(signature of representative or person making cl Address: 1375 Sierra Bonita Suite #1, Los	narge) Print Name and Title	(858) 361-7533  Fax No. (323) 746-5512  e-Mail
(signature of representative or person making cl		(858) 361-7533 Fax No. (323) 746-5512

### WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.





REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

February 26, 2016

Jeff Michaelson, President Association of Professional Disabled Service Employees 1375 S Sierra Bonita Avenue, Suite 1 Los Angeles, CA 90019-2505

Re: West Side Center for Independent Living

Case 31-CA-170522

Dear Ms. Michaelson:

The charge that you filed in this case on February 25, 2016 has been docketed as case number 31-CA-170522. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Simone Pang Gancayco whose telephone number is (310)235-6169. If this Board agent is not available, you may contact Supervisory Field Attorney Juan C. Ochoa Diaz whose telephone number is (310)235-7415.

**Right to Representation:** You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or at the Regional office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you

fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Procedures</u>: We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website <a href="www.nlrb.gov">www.nlrb.gov</a> or from the Regional Office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin Regional Director

Mori Rubin



REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

February 26, 2016

Anastasia Bacigalupo, Esq. West Side Center for Independent Living 12901 Venice Blvd. Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-170522

Dear Ms. Bacigalupo:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Simone Pang Gancayco whose telephone number is (310)235-6169. If this Board agent is not available, you may contact Supervisory Field Attorney Juan C. Ochoa Diaz whose telephone number is (310)235-7415.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor any request to place limitations on our use of position statements or evidence beyond those prescribed by the Freedom of Information Act and the Federal Records Act. Thus, we will not honor any claim of confidentiality except as provided by Exemption 4 of FOIA, 5 U.S.C. Sec. 552(b)(4), and any material you submit may be introduced as evidence at any hearing before an administrative law judge. We are also required by the Federal Records Act to keep copies of documents gathered in our investigation for some years after a case closes. Further, the Freedom of Information Act may require that we disclose such records in closed cases upon request, unless there is an applicable exemption. Examples of those exemptions are those that protect confidential financial information or personal privacy interests.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website, <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a> or from an NLRB office upon your request. NLRB Form 4541 offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin Regional Director

Mori Rubin

Enclosures:

1. Copy of Charge

2. Commerce Questionnaire



REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420

March 29, 2016

Anastasia Bacigalupo, Esq.
West Side Center for Independent Living
12901 Venice Blvd
Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-170522

Dear Ms. Bacigalupo:

This is to advise you that I have approved the withdrawal of the charge in the above matter.

Very truly yours,

Brian Gee
Acting Regional Director

cc: Jeff Michaelson, President

Association of Professional Disabled

Service Employees

1375 S Sierra Bonita Avenue, Suite 1

Los Angeles, CA 90019-2505

Form NLRB - 501 (2-08)

#### UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE Case Date Filed 3/8/2016 31-CA-171409

The air original of the charge with the regional	Director in which the alleged unfair labor practice of	ccurred or is occurring.
1.	EMPLOYER AGAINST WHOM CHARGE IS BROU	JGHT
a. Name of Employer		b. Tel. No.
West Side Center for Independent Living		(310) 390-3611 ext 201
, -		c. Cell No.
d. Address (street, city, state ZIP code)	e. Employer Representative	f. Fax No.
12901 Venice Blvd., Los Angeles, CA	Anastasia Bacigalupo, Esq.	(310) 390-4906
90066	,	g. e-Mail
90000		Anastasia@wcil.org
		h. Dispute Location (City and State)
		Los Angeles, CA
i. Type of Establishment (factory, nursing home,	j. Principal Product or Service	k. Number of workers at dispute location
hotel)		16
Non-profit disability rights organization	disability rights advocacy	
I. The above-named employer has engaged in and	is engaging unfair labor practices within the mean	ing of section 8(a), subsections (1) of the
National Labor Relations Act, and these unfair labor	or practices are practices affecting commerce within	n the meaning of the Act, or these unfair labor
practices are unfair practices affecting commerce in	within the meaning of the Act and the Postal Reorg	anization Act.
2. Basis of the Charge (set forth a clear and concis		
Since on or about (b) (6), (b) (7)(c) 2016, the	above-named Employer has begun as	nd maintained legal proceedings
: (b) (c) (b) (7)(c) ::1	C) 1: 4: 16 16 16 16 16 16	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
against(b) (6), (b) (7)(C) with an unlay	wful objective and for reasons that are	baseless and retaliatory.
3. Full name of party filing charge (if labor organiza	ation, give full name, including local name and num	ber)
Association of Professional Disable	ed Service Employees	
Association of Professional Disable	ed Service Employees	
		****
Association of Professional Disable  4a. Address (street and number, city, state, and Zi		4b. Tel. No.
		4b. Tel. No. (b) (6), (b) (7)(C)
4a. Address (street and number, city, state, and Zi		
		(b) (6), (b) (7)(C) 4c. Cell No.
4a. Address (street and number, city, state, and Zi		(b) (6), (b) (7)(C) 4c. Cell No. (b) (6), (b) (7)(C)
4a. Address (street and number, city, state, and Zi		(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No.
4a. Address (street and number, city, state, and Zi		(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)
4a. Address (street and number, city, state, and Zi		(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail
4a. Address (street and number, city, state, and Zi (b) (6), (b) (7)(C)	P code)	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)
4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)  5. Full name of national or international labor organ	P code)	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)
4a. Address (street and number, city, state, and Zi (b) (6), (b) (7)(C)	P code)	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)
4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)  5. Full name of national or international labor organ	P code)	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)
4a. Address (street and number, city, state, and Zi  (b) (6), (b) (7)(C)  5. Full name of national or international labor organization)	P code)	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  (to be filled in when charge is filed by a labor
4a. Address (street and number, city, state, and Zi  (b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION	P code)  nization of which it is an affiliate or constituent unit	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C) (to be filled in when charge is filed by a labor  Tel. No.
4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge at	P code)  nization of which it is an affiliate or constituent unit	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  (to be filled in when charge is filed by a labor
4a. Address (street and number, city, state, and Zi  (b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION	P code)  nization of which it is an affiliate or constituent unit	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  (to be filled in when charge is filed by a labor  Tel. No. (b) (6), (b) (7)(C)
4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge and who who who we have the charge and belief.	P code)  nization of which it is an affiliate or constituent unit of the const	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  (to be filled in when charge is filed by a labor  Tel. No. (b) (6), (b) (7)(C)  Office, if any, Cell No.
4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge at	P code)  nization of which it is an affiliate or constituent unit	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  (to be filled in when charge is filed by a labor  Tel. No. (b) (6), (b) (7)(C)
4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge as my knowledge and helief  By: (b) (6), (b) (7)(C)	P code)  nization of which it is an affiliate or constituent unit of that the statements are true to the best of  (b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  (to be filled in when charge is filed by a labor  Tel. No. (b) (6), (b) (7)(C)  Office, if any, Cell No. (b) (6), (b) (7)(C)
4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge and who who who we have the charge and belief.	P code)  nization of which it is an affiliate or constituent unit of that the statements are true to the best of  (b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  (to be filled in when charge is filed by a labor  Tel. No. (b) (6), (b) (7)(C)  Office, if any, Cell No. (b) (6), (b) (7)(C)  Fax No.
4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge as my knowledge and helief  By:  (b) (6), (b) (7)(C)	P code)  nization of which it is an affiliate or constituent unit of the statements are true to the best of   (b) (6), (b) (7)(C)  narge) Print Name and Title	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  (to be filled in when charge is filed by a labor  Tel. No. (b) (6), (b) (7)(C)  Office, if any, Cell No. (b) (6), (b) (7)(C)  Fax No. (b) (6), (b) (7)(C)
4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge as my knowledge and helief  By:  (b) (6), (b) (7)(C)	P code)  nization of which it is an affiliate or constituent unit of the statements are true to the best of   (b) (6), (b) (7)(C)  narge) Print Name and Title	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  (to be filled in when charge is filed by a labor  Tel. No. (b) (6), (b) (7)(C)  Office, if any, Cell No. (b) (6), (b) (7)(C)  Fax No. (b) (6), (b) (7)(C)  e-Mail
4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge as my knowledge and helief  By: (b) (6), (b) (7)(C)	P code)  nization of which it is an affiliate or constituent unit of that the statements are true to the best of  (b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  (to be filled in when charge is filed by a labor  Tel. No. (b) (6), (b) (7)(C)  Office, if any, Cell No. (b) (6), (b) (7)(C)  Fax No. (b) (6), (b) (7)(C)  e-Mail
4a. Address (street and number, city, state, and ZI  (b) (6), (b) (7)(C)  5. Full name of national or international labor organization)  6. DECLARATION I declare that I have read the above charge as my knowledge and helief  By: (b) (6), (b) (7)(C)	P code)  nization of which it is an affiliate or constituent unit of the statements are true to the best of   (b) (6), (b) (7)(C)  narge) Print Name and Title	(b) (6), (b) (7)(C)  4c. Cell No. (b) (6), (b) (7)(C)  4d. Fax No. (b) (6), (b) (7)(C)  4e. e-Mail (b) (6), (b) (7)(C)  (to be filled in when charge is filed by a labor  Tel. No. (b) (6), (b) (7)(C)  Office, if any, Cell No. (b) (6), (b) (7)(C)  Fax No. (b) (6), (b) (7)(C)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.



REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

March 10, 2016

Anastasia Bacigalupo, ESQ. West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-171409

Dear Ms. Bacigalupo:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310) 235-7805. If this Board agent is not available, you may contact Supervisory Field Attorney Juan C. Ochoa Diaz whose telephone number is (310) 235-7415.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

Presentation of Your Evidence: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly. Due to the nature of the allegations in the enclosed unfair labor practice charge, we have identified this case as one in which injunctive relief pursuant to Section 10(j) of the Act may be appropriate.

Therefore, in addition to investigating the merits of the unfair labor practice allegations, the Board agent will also inquire into those factors relevant to making a determination as to whether or not 10(j) injunctive relief is appropriate in this case. Accordingly, please include your position on the appropriateness of Section 10(j) relief when you submit your evidence relevant to the investigation.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor any request to place limitations on our use of position statements or evidence beyond those prescribed by the Freedom of Information Act and the Federal Records Act. Thus, we will not honor any claim of confidentiality except as provided by Exemption 4 of FOIA, 5 U.S.C. Sec. 552(b)(4), and any material you submit may be introduced as evidence at any hearing before an administrative law judge. We are also required by the Federal Records Act to keep copies of documents gathered in our investigation for some years after a case closes. Further, the Freedom of Information Act may require that we disclose such records in closed cases upon request, unless there is an applicable exemption. Examples of those exemptions are those that protect confidential financial information or personal privacy interests.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website, <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a> or from an NLRB office upon your request. NLRB Form 4541 offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin Regional Director

Mori Rubin

#### Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire





REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

March 10, 2016



Re: West Side Center for Independent Living Case 31-CA-171409

Dear (b) (6), (b) (7)(C):

The charge that you filed in this case on March 08, 2016 has been docketed as case number 31-CA-171409. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310) 235-7805. If this Board agent is not available, you may contact Supervisory Field Attorney Juan C. Ochoa Diaz whose telephone number is (310) 235-7415.

<u>Right to Representation</u>: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, <u>www.nlrb.gov</u>, or at the Regional office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you

fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website <a href="www.nlrb.gov">www.nlrb.gov</a> or from the Regional Office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin

Mori Rubin Regional Director



REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420

June 30, 2016

Anastasia Bacigalupo, Esq. West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-171409

Dear Ms. Bacigalupo:

This is to advise you that I have approved the withdrawal of the charge in the above matter.

Very truly yours,

Brian Gee Acting Regional Director

cc: (b) (6), (b) (7)(C)
Association of Professional Disabled
Service Employees

(b) (6), (b) (7)(C)

Form NLRB - 501 (2-08)

#### UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

File an original of this charge with NLRB Regional		
a. Name of Employer	EMPLOYER AGAINST WHOM CHARGE IS	b. Tel. No.
West Side Center for Independent Living		(310) 390-3611 ext 201
West side Center for independent Living		c. Cell No.
d. Address (street, city, state ZIP code)	e. Employer Representative	f. Fax No.
12901 Venice Blvd., Los Angeles, CA	Anastasia Bacigalupo, Esq.	(310) 390-4906
90066	l maria a marganapa, a mar	g. e-Mail
7000		Anastasia@wcil.org
		h. Dispute Location (City and State)
		Los Angeles, CA
i. Type of Establishment (factory, nursing home,	j. Principal Product or Service	k. Number of workers at dispute location
hotel)	dischilles sights a decrease	16
Non-profit disability rights organization	disability rights advocacy	
		meaning of section 8(a), subsections (1), (3), (4), (5) of nerce within the meaning of the Act, or these unfair
labor practices are unfair practices affecting comm		
2. Basis of the Charge (set forth a clear and conci-		
Since about (a) (a) (b) (b) (c) (c) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	e-named Employer has suspende	d (b) (6), (b) (7)(C) indefinitely and
Since about denied access to the Employer's	facility in retaliation for Unio	on activities. Board activities, and
other protected concerted activities.	The Employer suspended (b) (6).	(b) (7)(C) without giving the Union
•		without giving the officin
prior notice or an opportunity to barg	gain over this suspension.	
3. Full name of party filing charge (if labor organize	ation, give full name, including local name an	nd number)
Association of Professional Disable	-	,
	ou dor to ampro, con	
4a. Address (street and number, city, state, and Z	ID code)	4b. Tel. No.
4a. Address (street and number, dity, state, and 2	ii- code)	(b) (6), (b) (7)(C)
(b) (c) (b) (7)(c)		4c. Cell No.
(b) (6), (b) (7)(C)		(b) (6), (b) (7)(C)
		4d. Fax No.
		(b) (6), (b) (7)(C)
		4e, e-Mail
, , , , , , , , , , , , , , , , , , , ,		(b) (6), (b) (7)(C)
	nization of which it is an affiliate or constituer	nt unit (to be filled in when charge is filed by a labor
organization)		
6. DECLARATION (D) (6) (D) (7) (1)	/7//01	Tel. No.
l declare that நிகுந்த ர <sup>(க) (க) (க) (க)(க)</sup> ம்) (6), (b)	(7)(C) the statements are true to the besi	t of (b) (6), (b) (7)(C)
my knowledg be		
<sub>by</sub> (b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	Office, if any, Cell No. (b) (6), (b) (7)(C)
	$(\mathbf{b})(\mathbf{b}), (\mathbf{b})(1)(0)$	(5) (5), (5) (1)(5)
(b) (6), (b) (7)(C) of ((b) (6), (b) (7)(b) (6), (b) (7)(C) person making c	harge) Print Name and Title	Fax No.
}		(b) (6), (b) (7)(C)
$\frac{Address:}{(b)(b),(b)(7)(C)}(b)(6),(b)(7)(C)$	Date: 03/08/16	e-Mail
(b) (6), (b) (7)(C) $(D)$ $(D)$ , $(D)$	0,,00,10	(b) (6), (b) (7)(C)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.





REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

March 11, 2016



Re: West Side Center for Independent Living

Case 31-CA-171410

Dear (b) (6), (b) (7)(C):

The charge that you filed in this case on March 08, 2016 has been docketed as case number 31-CA-171410. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310)235-7805. If this Board agent is not available, you may contact Supervisory Field Attorney Juan C. Ochoa Diaz whose telephone number is (310)235-7415.

**Right to Representation:** You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or at the Regional office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website <a href="www.nlrb.gov">www.nlrb.gov</a> or from the Regional Office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin

Mori Rubin Regional Director





REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

March 11, 2016

Anastasia Bacigalupo, Esq. West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-171410

Dear Ms. Bacigalupo:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Carlos Gonzalez whose telephone number is (310)235-7805. If this Board agent is not available, you may contact Supervisory Field Attorney Juan C. Ochoa Diaz whose telephone number is (310)235-7415.

<u>Right to Representation</u>: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, <u>www.nlrb.gov</u>, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

Presentation of Your Evidence: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly. Due to the nature of the allegations in the enclosed unfair labor practice charge, we have identified this case as one in which injunctive relief pursuant to Section 10(j) of the Act may be appropriate. Therefore, in addition to investigating the merits of the unfair labor practice allegations, the

Board agent will also inquire into those factors relevant to making a determination as to whether or not 10(j) injunctive relief is appropriate in this case. Accordingly, please include your position on the appropriateness of Section 10(j) relief when you submit your evidence relevant to the investigation.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor any request to place limitations on our use of position statements or evidence beyond those prescribed by the Freedom of Information Act and the Federal Records Act. Thus, we will not honor any claim of confidentiality except as provided by Exemption 4 of FOIA, 5 U.S.C. Sec. 552(b)(4), and any material you submit may be introduced as evidence at any hearing before an administrative law judge. We are also required by the Federal Records Act to keep copies of documents gathered in our investigation for some years after a case closes. Further, the Freedom of Information Act may require that we disclose such records in closed cases upon request, unless there is an applicable exemption. Examples of those exemptions are those that protect confidential financial information or personal privacy interests.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website, <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a> or from an NLRB office upon your request. NLRB Form 4541 offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin

Mori Rubin Regional Director

#### Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire



REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420

June 30, 2016

Anastasia Bacigalupo, ESQ. West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re:

West Side Center for Independent Living

Case 31-CA-171410

Dear Ms. Bacigalupo:

This is to advise that I have approved the withdrawal of the portions of the charge alleging that West Side Center for Independent Living violated Section 8(a)(1) of the Act by denying (b) (6), (b) (7)(C) access to the Employer's facility and that it violated Section 8(a)(1), (3), and (4) of the Act by suspending indefinitely.

The remaining portion of the charge alleging that the Employer violated Section 8(a)(5) of the Act by suspending(b) (6), (b) (7)(C) without giving the Union prior notice or an opportunity to bargain over this suspension remains outstanding and will be subject to further proceedings.

BRIAN GEE

Acting Regional Director

truly yours,

cc:

(b) (6), (b) (7)(C)
Association of Professional Disabled
Service Employees

(b) (6), (b) (7)(C)



REGION 31 11500 W Olympic Blvd Suite 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420

April 17, 2017

Anastasia Bacigalupo, ESQ. West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re:

West Side Center for Independent Living

Case 31-CA-171410

Dear Ms. Bacigalupo:

This is to advise you that I have approved the withdrawal of the charge in the above matter.

Very truly yours,

Mori Rubin

Regional Director

cc:

(b) (6), (b) (7)(C)
Association of Professional Disabled
Service Employees

(b) (6), (b) (7)(C)

Form NLRB - 501 (2-08)

#### UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

#### **CHARGE AGAINST EMPLOYER**

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE

Case Date Filed

31-CA-173742 4/8/16

File an original of this charge with NLRB Regional	Director in which the alleged unfair labor practice oc	curred or is occurring.
	EMPLOYER AGAINST WHOM CHARGE IS BROUG	The state of the s
a. Name of Employer West Side Center for Independent Living		b. Tel. No.
West Side Center for Independent Living		(310) 390-3611 ext 201
d. Address (street, city, state ZIP code)	e. Employer Representative	f. Fax No.
12901 Venice Blvd., Los Angeles, CA	Anastasia Bacigalupo, Esq.	(310) 390-4906
90066	Anastasia Bacigarupo, Esq.	g. e-Mail
90000		Anastasia@wcil.org
		h. Dispute Location (City and State)
		Los Angeles, CA
i. Type of Establishment (factory, nursing home,	j. Principal Product or Service	k. Number of workers at dispute location
hotel)	j. Principal Product of Service	16
Non-profit disability rights organization	disability rights advocacy	10
	is engaging unfair labor practices within the meaning	or of section 8(a), subsections (1), and (5) of
	labor practices are practices affecting commerce will	
labor practices are unfair practices affecting comm	erce within the meaning of the Act and the Postal Re	eorganization Act.
2. Basis of the Charge (set forth a clear and concis	e statement of the facts constituting the alleged unfa	air labor practices)
		•
Within the past six months, the above-na	med Employer unilaterally increased emp	oloyee(b) (6), (b) (7)(C) weekly work
hours without providing the Union with	notice or an opportunity to bargain.	
	, ,	
3. Full name of party filing charge (if labor organiza	tion, give full name, including local name and numb	er)
Association of Professional Disable		
Association of Frotessional Disable	a der vice Employees	
4- Address (standard see al. 20	2 4-2	4b. Tel. No.
4a. Address (street and number, city, state, and ZII	s code)	1
		(858) 361-7533 4c. Cell No.
1375 Sierra Bonita Suite #1, Los Angeles,	California 90019	(858) 361-7533
		4d. Fax No.
		(323) 746-5512
		4e. e-Mail
5.5.11		jeffmichaelson@hotmail.com
<ol> <li>Full name of national or international labor organization)</li> </ol>	ization of which it is an affiliate or constituent unit (to	o be filled in when charge is filed by a labor
organization		
6. DECLARATION		Tel. No.
I declare that I have read the above charge ar	nd that the statements are true to the best of	(858) 361-7533
my knowledge and belief.	<u> </u>	Office, if any, Cell No.
Ву:	Jeff Michaelson, Union president	
	John Whonacison, Omon president	(858) 361-7533
(signature of representative or person making ch	arge) Print Name and Title	Fax No.
		(323) 746-5512
Address: 1375 Sierra Bonita Suite #1, Los	Date: 0 5/08 1/6	e-Mail
Angeles, California 90019	<b>5</b> ,	jeffmichaelson@hotmail.com
50.00, 04.11011114 70017		-

### WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CÓDE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.



REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

April 13, 2016

Anastasia Bacigalupo, ESQ. West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-173742

Dear Ms. Bacigalupo:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Simone Pang Gancayco whose telephone number is (310) 235-6169. If this Board agent is not available, you may contact Supervisory Field Attorney Juan C. Ochoa Diaz whose telephone number is (310) 235-7415.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

Presentation of Your Evidence: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly. Due to the nature of the allegations in the enclosed unfair labor practice charge, we have identified this case as one in which injunctive relief pursuant to Section 10(j) of the Act may be appropriate.

Therefore, in addition to investigating the merits of the unfair labor practice allegations, the Board agent will also inquire into those factors relevant to making a determination as to whether or not 10(j) injunctive relief is appropriate in this case. Accordingly, please include your position on the appropriateness of Section 10(j) relief when you submit your evidence relevant to the investigation.

- 2 -

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor any request to place limitations on our use of position statements or evidence beyond those prescribed by the Freedom of Information Act and the Federal Records Act. Thus, we will not honor any claim of confidentiality except as provided by Exemption 4 of FOIA, 5 U.S.C. Sec. 552(b)(4), and any material you submit may be introduced as evidence at any hearing before an administrative law judge. We are also required by the Federal Records Act to keep copies of documents gathered in our investigation for some years after a case closes. Further, the Freedom of Information Act may require that we disclose such records in closed cases upon request, unless there is an applicable exemption. Examples of those exemptions are those that protect confidential financial information or personal privacy interests.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website, <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a> or from an NLRB office upon your request. NLRB Form 4541 offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Mori Rubin

Very truly yours,

- 3 -

Mori Rubin Regional Director

### Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire





Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

April 13, 2016

Jeff Michaelson, President Association of Professional Disabled Service Employees 1375 S Sierra Bonita Ave Suite 1 Los Angeles, CA 90019-2505

11500 W Olympic Blvd Ste 600

Los Angeles, CA 90064-1753

Re: West Side Center for Independent Living

Case 31-CA-173742

Dear Mr. Michaelson:

REGION 31

The charge that you filed in this case on April 08, 2016 has been docketed as case number 31-CA-173742. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Simone Pang Gancayco whose telephone number is (310) 235-6169. If this Board agent is not available, you may contact Supervisory Field Attorney Juan C. Ochoa Diaz whose telephone number is (310) 235-7415.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or at the Regional office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you

fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Procedures</u>: We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website <a href="www.nlrb.gov">www.nlrb.gov</a> or from the Regional Office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin

Mori Rubin Regional Director



REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420

April 28, 2016

Anastasia Bacigalupo, ESQ. West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-173742

Dear Ms. Bacigalupo:

This is to advise you that I have approved the withdrawal of the charge in the above matter.

Very truly yours,

/s/ Brian Gee

BRIAN GEE Acting Regional Director

cc: Jeff Michaelson, President Association of Professional Disabled Service Employees 1375 S Sierra Bonita Ave, Suite 1 Los Angeles, CA 90019-2505 Form NLRB - 501 (2-08)

#### UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

#### INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE

Case Date Filed

31-CA-175308 4/29/2016

File an original of this charge with NLRB Regional Dire	ctor in which the alleged unfair labor practice or	ccurred or is occurring.
1. EMF	PLOYER AGAINST WHOM CHARGE IS BROU	GHT
a. Name of Employer		b. Tel. No.
West Side Center for Independent Living		(310) 390-3611 ext 201
1		c. Cell No.
d. Address (street, city, state ZIP code) e.	Employer Representative	f. Fax No.
	nastasia Bacigalupo, Esq.	(310) 390-4906
90066	Australia Zurigarapo, Zod	g. e-Mail
70000		Anastasia@wcil.org
		h. Dispute Location (City and State)
		Los Angeles, CA
i. Type of Establishment (factory, nursing home, j. f	Principal Product or Service	k. Number of workers at dispute location
hotel)	-inicipal Product of Service	16
	sability rights advocacy	10
		of action 0(a) asharations (1) and (2) of
The above-named employer has engaged in and is e the National Labor Relations Act, and these unfair labor		
labor practices are unfair practices affecting commerce	within the meaning of the Act and the Postal R	eorganization Act
Basis of the Charge (set forth a clear and concise st	atement of the facts constituting the alleged unf	air lahor practices)
2. Dasis of the charge (set forth a clear and concise st	atement of the facts constituting the alleged and	an labor praduodo,
On (b) (6), (b) (7)(C) 2016, the above-named	Employer terminated amployee	(6) (b) $(7)$ (C) in retaliation for
		in retaination for
Union and protected concerted activ	ities.	
•		
3. Full name of party filing charge (if labor organization	give full name, including local name and numb	er)
	-	61)
Association of Professional Disabled S	service Employees	
4a. Address (street and number, city, state, and ZIP code)		4b. Tel. No.
1375 Sierra Bonita Suite #1, Los Angeles, California 90019		(858) 361-7533
		4c. Cell No.
		(858) 361-7533
		4d. Fax No.
		(323) 746-5512
		4e. e-Mail
		jeffmichaelson@hotmail.com
5. Full name of national or international labor organizat	ion of which it is an affiliate or constituent unit (t	o be filled in when charge is filed by a labor
organization)		
6. DECLARATION		Tel. No.
I declare that I have read the above charge and that the statements are true to the best of		(858) 361-7533
my knowledge and belief.		(030)301 7333
		Office, if any, Cell No.
Ву:	Jeff Michaelson, Union president	(858) 361-7533
(signature of representative or person making charge	e) Print Name and Title	Fax No.
	. 4. 1	(323) 746-5512
Address: 1375 Sierra Bonita Suite #1, Los	Date: 04/29116	e-Mail
Angeles, California 90019	1 + ( + +	jeffmichaelson@hotmail.com

### WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.





REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

May 3, 2016

Jeff Michaelson, President Association of Professional Disabled Service Employees 1375 S Sierra Bonita Ave, Suite 1 Los Angeles, CA 90019-2505

Re: West Side Center for Independent Living

Case 31-CA-175308

Dear Mr. Michaelson:

The charge that you filed in this case on April 29, 2016 has been docketed as case number 31-CA-175308. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Simone Pang Gancayco whose telephone number is (310)235-6169. If this Board agent is not available, you may contact Supervisory Field Attorney Juan C. Ochoa Diaz whose telephone number is (310)235-7415.

**Right to Representation:** You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or at the Regional office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you

fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website <a href="www.nlrb.gov">www.nlrb.gov</a> or from the Regional Office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin Regional Director

Mori Rubin



REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420

Download NLRB Mobile App

May 3, 2016

Anastasia Bacigalupo, Esq. West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-175308

Dear Ms. Bacigalupo:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Simone Pang Gancayco whose telephone number is (310)235-6169. If this Board agent is not available, you may contact Supervisory Field Attorney Juan C. Ochoa Diaz whose telephone number is (310)235-7415.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

Presentation of Your Evidence: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly. Due to the nature of the allegations in the enclosed unfair labor practice charge, we have identified this case as one in which injunctive relief pursuant to Section 10(j) of the Act may be appropriate. Therefore, in addition to investigating the merits of the unfair labor practice allegations, the Board agent will also inquire into those factors relevant to making a determination as to whether or not 10(j) injunctive relief is appropriate in this case. Accordingly, please include your position on the appropriateness of Section 10(j) relief when you submit your evidence relevant to the investigation.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor any request to place limitations on our use of position statements or evidence beyond those prescribed by the Freedom of Information Act and the Federal Records Act. Thus, we will not honor any claim of confidentiality except as provided by Exemption 4 of FOIA, 5 U.S.C. Sec. 552(b)(4), and any material you submit may be introduced as evidence at any hearing before an administrative law judge. We are also required by the Federal Records Act to keep copies of documents gathered in our investigation for some years after a case closes. Further, the Freedom of Information Act may require that we disclose such records in closed cases upon request, unless there is an applicable exemption. Examples of those exemptions are those that protect confidential financial information or personal privacy interests.

**Procedures:** We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website, www.nlrb.gov. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, www.nlrb.gov or from an NLRB office upon your request. NLRB Form 4541 offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin Regional Director

Mori Rubin

#### Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire



REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420

October 26, 2016

Jeff Michaelson, President Association of Professional Disabled Service Employees 1375 S Sierra Bonita Ave, Suite 1 Los Angeles, CA 90019-2505

Re: West Side Center for Independent Living

Case 31-CA-175308

Dear Mr. Michaelson:

We have carefully investigated and considered your charge that West Side Center for Independent Living ("Employer") has violated the National Labor Relations Act.

**Decision to Dismiss:** Based on that investigation, I have decided to dismiss your charge for the reasons discussed below.

Your charge alleges that the Employer violated Section 8(a)(3) and (1) of the Act by terminating employee (b) (6). (b) (7)(C) in retaliation for union and protected concerted activities. Although the evidence presented established a prima facie case, the Employer met its burden under Wright Line, 251 NLRB 1083, 1089 (1980), enfd. 662 F.2d 899 (1st Cir. 1981), cert. denied 455 U.S. 989 (1982), approved in NLRB v. Transportation Management Corp., 462 U.S. 393, 399-403 (1983), establishing that it would have terminated even in the absence of union and protected, concerted activities, including by providing evidence that the Employer did not tolerate performance deficiencies with other employees or with opportunities to correct deficiencies without improvement. Accordingly, the evidence does not support finding a violation of the Act as alleged.

Your Right to Appeal: You may appeal my decision to the General Counsel of the National Labor Relations Board, through the Office of Appeals. If you appeal, you may use the enclosed Appeal Form, which is also available at <a href="www.nlrb.gov">www.nlrb.gov</a>. However, you are encouraged to also submit a complete statement of the facts and reasons why you believe my decision was incorrect.

Means of Filing: An appeal may be filed electronically, by mail, by delivery service, or hand-delivered. Filing an appeal electronically is preferred but not required. The appeal MAY NOT be filed by fax or email. To file an appeal electronically, go to the Agency's website at <a href="https://www.nlrb.gov">www.nlrb.gov</a>, click on E-File Documents, enter the NLRB Case Number, and follow the detailed instructions. To file an appeal by mail or delivery service, address the appeal to the General Counsel at the National Labor Relations Board, Attn: Office of Appeals, 1015 Half Street SE, Washington, DC 20570-0001. Unless filed electronically, a copy of the appeal should also be sent to me.

Appeal Due Date: The appeal is due on November 9, 2016. If the appeal is filed electronically, the transmission of the entire document through the Agency's website must be completed no later than 11:59 p.m. Eastern Time on the due date. If filing by mail or by delivery service an appeal will be found to be timely filed if it is postmarked or given to a delivery service no later than November 8, 2016. If an appeal is postmarked or given to a delivery service on the due date, it will be rejected as untimely. If hand delivered, an appeal must be received by the General Counsel in Washington D.C. by 5:00 p.m. Eastern Time on the appeal due date. If an appeal is not submitted in accordance with this paragraph, it will be rejected.

Extension of Time to File Appeal: The General Counsel may allow additional time to file the appeal if the Charging Party provides a good reason for doing so and the request for an extension of time is received on or before November 9, 2016. The request may be filed electronically through the E-File Documents link on our website <a href="www.nlrb.gov">www.nlrb.gov</a>, by fax to (202)273-4283, by mail, or by delivery service. The General Counsel will not consider any request for an extension of time to file an appeal received after <a href="November 9, 2016">November 9, 2016</a>, even if it is postmarked or given to the delivery service before the due date. Unless filed electronically, a copy of the extension of time should also be sent to me.

Confidentiality: We will not honor any claim of confidentiality or privilege or any limitations on our use of appeal statements or supporting evidence beyond those prescribed by the Federal Records Act and the Freedom of Information Act (FOIA). Thus, we may disclose an appeal statement to a party upon request during the processing of the appeal. If the appeal is successful, any statement or material submitted with the appeal may be introduced as evidence at a hearing before an administrative law judge. Because the Federal Records Act requires us to keep copies of case handling documents for some years after a case closes, we may be required by the FOIA to disclose those documents absent an applicable exemption such as those that protect confidential sources, commercial/financial information, or personal privacy interests.

Very truly yours.

Mori Rubin Regional Director

Enclosure

cc: Anastasia Bacigalupo, Esq.
West Side Center for Independent Living
12901 Venice Blvd
Los Angeles, CA 90066-3509

Form NLRB - 501 (2-08)

### UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

#### **CHARGE AGAINST EMPLOYER**

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE

Case Date Filed

31-CA-182021 38/10/2016

File all original of this charge with NERS Regional Director in which the alleged diffall labor practice occurred or is occurring.			
EMPLOYER AGAINST WHOM CHARGE IS BROUGHT			
a. Name of Employer		b. Tel. No.	
West Side Center for Independent Living		(310) 390-3611 ext 201	
		c. Cell No.	
d. Address (street, city, state ZIP code)	e. Employer Representative	f. Fax No.	
12901 Venice Blvd., Los Angeles, CA	Anastasia Bacigalupo	(310) 390-4906	
90066		g. e-Mail	
		Anastasia@wcil.org	
		h. Dispute Location (City and State)	
		Los Angeles, CA	
	j. Principal Product or Service	k. Number of workers at dispute location	
hotel)		16	
Non-profit disability rights organization	disability rights advocacy		
I. The above-named employer has engaged in and	is engaging unfair labor practices within the meanir	ng of section 8(a), subsections (1) and (5) of the	
National Labor Relations Act, and these unfair labor	practices are practices affecting commerce within	the meaning of the Act, or these unfair labor	
practices are unfair practices affecting commerce w			
2. Basis of the Charge (set forth a clear and concise	e statement of the facts constituting the alleged unf	air labor practices)	
On about April 22, 2016, the above-named employer engaged in direct dealing with an employee			
concerning changes to the employee's		2 ,	
salvaning villinges to the employee s	, and one on the officer	•	
3. Full name of party filing charge (if labor organization, give full name, including local name and number)			
		er)	
Association of Professional Disabled Service Employees			
4a. Address (street and number, city, state, and ZIP code)		4b. Tel. No.	
		(310) 461-9648	
		4c. Cell No.	
1375 Sierra Bonita Suite #1, Los Angeles, California 90019		(310) 461-9648	
		4d. Fax No.	
		(323) 746-5512	
		4e. e-Mail	
		jeffmichaelson@hotmail.com	
5. Full name of national or international labor organi	zation of which it is an affiliate or constituent unit //		
organization)	Lation of Millor it is an animate of constituent unit (	5 55 miles in milen energe is med by a label	
6. DECLARATION		Tel. No.	
I declare that I have read the above charge and that the statements are true to the best of		(858) 361-7533	
my knowledge and belief.		Office if any Call No	
	Jeff Michaelson IInianidt	Office, if any, Cell No.	
Ву:	Jeff Michaelson, Union president	(858) 361-7533	
(signature of representative or person making cha	arge) Print Name and Title	Fax No.	
(January of representative of person making the		(323) 746-5512	
Address: 1375 Sierra Bonita Suite #1, Los	Date: 08)10/)6	e-Mail	
- Address: 13/3 Merra Bonna Silite #1 1.00	Usie /// / /// -	I STIVIAN	
	Date: 00/10//6		
Angeles, California 90019	Date: 00/101/6	jeffmichaelson@hotmail.com	

### WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.





REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

August 12, 2016

Anastasia Bacigalupo, ESQ. West Side Center for Independent Living 12901 Venice Blvd Los Angeles, CA 90066-3509

Re: West Side Center for Independent Living

Case 31-CA-182021

Dear Ms. Bacigalupo:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Nayla Wren whose telephone number is (310)307-7311. If this Board agent is not available, you may contact Supervisory Field Attorney Juan C. Ochoa Diaz whose telephone number is (310)307-7298.

<u>Right to Representation</u>: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, <u>www.nlrb.gov</u>, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

Presentation of Your Evidence: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly. Due to the nature of the allegations in the enclosed unfair labor practice charge, we have identified this case as one in which injunctive relief pursuant to Section 10(j) of the Act may be appropriate. Therefore, in addition to investigating the merits of the unfair labor practice allegations, the Board agent will also inquire into those factors relevant to making a determination as to whether or not 10(j) injunctive relief is appropriate in this case. Accordingly, please include your

position on the appropriateness of Section 10(j) relief when you submit your evidence relevant to the investigation.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor any request to place limitations on our use of position statements or evidence beyond those prescribed by the Freedom of Information Act and the Federal Records Act. Thus, we will not honor any claim of confidentiality except as provided by Exemption 4 of FOIA, 5 U.S.C. Sec. 552(b)(4), and any material you submit may be introduced as evidence at any hearing before an administrative law judge. We are also required by the Federal Records Act to keep copies of documents gathered in our investigation for some years after a case closes. Further, the Freedom of Information Act may require that we disclose such records in closed cases upon request, unless there is an applicable exemption. Examples of those exemptions are those that protect confidential financial information or personal privacy interests.

**Procedures:** We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website, www.nlrb.gov. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, www.nlrb.gov or from an NLRB office upon your request. NLRB Form 4541 offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin MORI RUBIN Regional Director

#### Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire





Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420 Download NLRB Mobile App

August 12, 2016

Jeff Michaelson, President Association of Professional Disabled Service Employees 1375 S Sierra Bonita Ave Suite 1 Los Angeles, CA 90019-2505

11500 W Olympic Blvd Ste 600

Los Angeles, CA 90064-1753

Re: West Side Center for Independent Living

Case 31-CA-182021

#### Dear Michaelson:

REGION 31

The charge that you filed in this case on August 10, 2016 has been docketed as case number 31-CA-182021. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Nayla Wren whose telephone number is (310)307-7311. If this Board agent is not available, you may contact Supervisory Field Attorney Juan C. Ochoa Diaz whose telephone number is (310)307-7298.

**Right to Representation:** You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or at the Regional office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you

fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials by E-Filing (not e-mailing) through our website <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

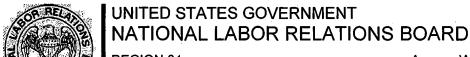
Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website <a href="www.nlrb.gov">www.nlrb.gov</a> or from the Regional Office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Mori Rubin

MORI RUBIN Regional Director



REGION 31 11500 W Olympic Blvd Ste 600 Los Angeles, CA 90064-1753 Agency Website: www.nlrb.gov Telephone: (310)235-7351 Fax: (310)235-7420

September 30, 2016

Jeff Michaelson, President Association of Professional Disabled Service Employees 1375 S Sierra Bonita Ave Suite 1 Los Angeles, CA 90019-2505

Re: West Side Center for Independent Living

Case 31-CA-182021

Dear Mr. Michaelson:

We have carefully investigated and considered your charge that West Side Center for Independent Living ("Employer") has violated the National Labor Relations Act.

**Decision to Dismiss:** Based on that investigation, I have decided to dismiss your charge for the reasons discussed below.

Your charge alleges that the Employer violated Section 8(a)(5) of the Act by dealing directly with an employee concerning changes to the employee's salary, to the exclusion of the Union. The investigation revealed that there was insufficient evidence to establish that the employee involved was represented by the Union at the time of the alleged direct dealing because the evidence failed to establish that the employee's job classification was included in the certified bargaining unit represented by the Union at the time of the alleged direct dealing. Accordingly, the evidence does not support finding a violation of the Act as alleged.

Your Right to Appeal: You may appeal my decision to the General Counsel of the National Labor Relations Board, through the Office of Appeals. If you appeal, you may use the enclosed Appeal Form, which is also available at <a href="www.nlrb.gov">www.nlrb.gov</a>. However, you are encouraged to also submit a complete statement of the facts and reasons why you believe my decision was incorrect.

Means of Filing: An appeal may be filed electronically, by mail, by delivery service, or hand-delivered. Filing an appeal electronically is preferred but not required. The appeal MAY NOT be filed by fax or email. To file an appeal electronically, go to the Agency's website at <a href="www.nlrb.gov">www.nlrb.gov</a>, click on E-File Documents, enter the NLRB Case Number, and follow the detailed instructions. To file an appeal by mail or delivery service, address the appeal to the General Counsel at the National Labor Relations Board, Attn: Office of Appeals, 1015 Half Street SE, Washington, DC 20570-0001. Unless filed electronically, a copy of the appeal should also be sent to me.

Appeal Due Date: The appeal is due on October 17, 2016. If the appeal is filed electronically, the transmission of the entire document through the Agency's website must be completed no later than 11:59 p.m. Eastern Time on the due date. If filing by mail or by delivery service an appeal will be found to be timely filed if it is postmarked or given to a delivery service no later than October 16, 2016. If an appeal is postmarked or given to a delivery service on the due date, it will be rejected as untimely. If hand delivered, an appeal must be received by the General Counsel in Washington D.C. by 5:00 p.m. Eastern Time on the appeal due date. If an appeal is not submitted in accordance with this paragraph, it will be rejected.

Extension of Time to File Appeal: The General Counsel may allow additional time to file the appeal if the Charging Party provides a good reason for doing so and the request for an extension of time is received on or before October 17, 2016. The request may be filed electronically through the *E-File Documents* link on our website <a href="https://www.nlrb.gov">www.nlrb.gov</a>, by fax to (202)273-4283, by mail, or by delivery service. The General Counsel will not consider any request for an extension of time to file an appeal received after October 17, 2016, even if it is postmarked or given to the delivery service before the due date. Unless filed electronically, a copy of the extension of time should also be sent to me.

Confidentiality: We will not honor any claim of confidentiality or privilege or any limitations on our use of appeal statements or supporting evidence beyond those prescribed by the Federal Records Act and the Freedom of Information Act (FOIA). Thus, we may disclose an appeal statement to a party upon request during the processing of the appeal. If the appeal is successful, any statement or material submitted with the appeal may be introduced as evidence at a hearing before an administrative law judge. Because the Federal Records Act requires us to keep copies of case handling documents for some years after a case closes, we may be required by the FOIA to disclose those documents absent an applicable exemption such as those that protect confidential sources, commercial/financial information, or personal privacy interests.

Very truly yours,

MORI RUBIN Regional Director

nallby

### Enclosure

cc: Anastasia Bacigalupo, ESQ.

West Side Center for Independent Living

12901 Venice Blvd

Los Angeles, CA 90066-3509